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‘No Longer Bulletproof’

Aotearoa/ New Zealand Men Discuss Aging and Masculinity

A dissertation presented in partial fulfilment of the requirements for the degree of

Doctor of Clinical Psychology

Massey University, Wellington,  
New Zealand.  
2019

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2019

## Abstract

Research on men has proliferated within in recent decades. However, much of this research has focussed on younger masculinities. While research on older men has also increased in recent years, there remains a lack of research on the ways in which masculinities are impacted by aging – particularly within a A/NZ context. This study took a social constructionist approach to exploring the ways in which A/NZ men make sense of masculinity as they age. Twenty-six men between the ages of 65 and 90 were interviewed and interviews were recorded, transcribed, and analysed using a thematic analysis approach. Analysis revealed a range of themes related to the operations of gendered power such as the invisibility of masculinity, egalitarianism, and a backlash against feminists. The men also reiterated dominant themes related to active aging, enjoyment, disengagement and decline, provision, masculinity as limiting, and increases in wisdom and insight. The ways in which themes of masculinity intersected with those related to aging were discussed with participants. The themes were related to theories of gender as performance, hegemonic masculinity, masculine capital, and selective optimisation and compensation. Implications, limitations, and suggested future directions are also discussed.

## Acknowledgements

Firstly, I would like to acknowledge the men who participated in this research. Thank you for allowing me into your homes to talk about your lives. This study would obviously have not existed without you and I appreciate your candour. I hope the interviews were enjoyable in some way for you; they certainly provided me with some valuable insights about what to expect as I age and helped assuage some of the fears I had about getting older.

To Keith, my primary supervisor, thank you for your honesty, humour, and insight and mahi over these few years. You have helped make this process as pain-free and relaxed as I could ever hope it to be! I'm sorry for sometimes being a bit slack; thank you for putting up with that. Thank you also for your words of encouragement and your general support in other areas of my life - like helping me get a job!

Antonia, thank you for your comments which have been as insightful as ever. I have always felt more confident knowing that you are a part of this team. You have been a huge part of my whole journey from my Master's to this.

And Simon, I appreciate the help you have given me over many years now, as I have worked towards becoming a Clinical Psychologist. This support extends to being part of my supervisory panel, which I have valued so much.

Rose, thank you so much for bearing with a sometimes stressed out, tired, and poor student dad over all these years. I love you so much and could not have done this without you.

To Brett, Ali, Joe, Alicia, Benny, Jasper...thank you for your patience and unwavering support! I am forever grateful to have such a relaxed, accepting, and supportive family as you lot. Love you.

Hannah, thank you for putting up with me while I was trying to get this done!

To all my other friends, or anyone I haven't thanked, thanks for being such welcome distractions. Without the support of all of you there is no way I would have made it through this protracted process. Now you can stop asking me about how it's going which I'm sure will be a relief for us all.

I would also like to acknowledge the support of Massey University, from whom I received the Massey University Vice-Chancellor's Doctoral Scholarship to help complete this project.

Aroha nui, Sam

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## Introductory Overview

The aging of the population in western countries, including Aotearoa/ New Zealand (A/NZ), is a well-established fact. Statistics NZ (2013) suggest the proportion of those aged 65+ has increased dramatically in recent years, and this trend is set to continue (Statistics NZ, 2014). Such forecasting has spurred diverse research into potential impacts of an aging population across socio-cultural, health, economic, and psychological spheres.

Labels like ‘silver tsunami,’ ‘age wave,’ and the ‘grey tsunami’ insinuate that society is about to be flooded or swamped; that existing healthcare infrastructure may not be equipped to cope with a swell in the ratio of older people (Charise, 2012); that the aging of the population is problematic. In A/NZ, an increased burden on the healthcare system (Bryant, Teasdale, Tobias, Cheung, & McHugh, 2004; Mays, 2013) and the general economy has been forecast (Bascand & Dunstan, 2014; Guest, 2014) but there remains a degree of uncertainty as to how profound the economic impact is likely to be (Ball et al., 2015, 2016).

While there may be cause for economic concern, an important consideration from a psychological perspective regards the subjective experiences of older people. It is imperative that the needs of older people are met; this requires the type of understanding statistical projections alone cannot provide. In light of this, the current research uses a social constructionist approach to examine the ways in which men make sense of masculinity and aging, including how dominant discourses might shape older men’s talk about these constructs.

Gender is an essential consideration for understanding older people’s lived experiences that has, until recently, been relatively neglected in both academic and lay thinking (Arber et al., 2003; Higgs & McGowan, 2013). Older people have been ‘othered’ in various ways (Calasanti, 2005; Fineman, 2014); and, despite a recent emphasis on the capabilities of older people, exclusion of this broad demographic continues (van Dyk, 2016). For instance, older people have been seen as ‘ungendered’ (Emslie et al., 2004; Spector-Mersel, 2006) or in sexual decline (Gott & Hinchliff, 2003; D. Jackson, 2016; Potts, Grace, Vares, & Gavey, 2006). Some have suggested that this exclusion is akin to ageism, and may be even more pronounced for older men (Calasanti & King, 2005; Minichiello, Browne, & Kendig, 2000).

Prior research on older people has generally focussed on women at the expense of men (Canham, 2009; Evans, Frank, Oliffe, & Gregory, 2011; Van den Hoonaard, 2007). Fleming (1999) highlighted a dominant discourse which constructs aging as a problem and emasculates older men. Recently, the literature has begun to redress the omission of older men, in line with

a flowering of research into masculinities more generally. Nevertheless, there has been a relative lack of work with this demographic in an A/NZ context.

The fact that there are fewer older men than women, and that they “are erroneously believed to enjoy a better quality of life” (Kosberg & Mangum, 2002, p. 27) may help to account for older men being overlooked in the gerontology literature for so long. It may be, as Twigg (2004) argued, that the qualities by which masculinity is constructed – namely “competitiveness” and “public invulnerability” – are barriers that obstruct investigations of potential “decline and loss” in men of this age (p.62). Whatever the reason, researchers have generally eschewed older men as relatively unappealing foci for study (Schrock & Schwalbe, 2009; Varley & Blasco, 2000).

It has also been suggested that older age (65 onwards) generally follows a course of ‘degendering’ – a developing androgyny that eventually erodes the binary between men and women (Hyde & Phillis, 1979; Silver, 2003; Sinnott, 1984) as men become more feminine (Hyde & Phillis, 1979; Strough et al., 2007). This may be because, as Emslie et al. (2006) argue, disruptive events (e.g. divorce, death of a spouse or partner, loss of employment, and sickness) in the lives of men necessitate a critical evaluation of previously held attitudes towards gender.

Nevertheless, aging men continue to consider masculinity and its related qualities as important components of self-identity (Canham, 2009; Schrock & Schwalbe, 2009; Thompson Jr & Langendoerfer, 2016), and their attempts to preserve aspects of masculinity may be stymied by negative constructions of older age (Tarrant, 2010). Distress may thus accrue when aspects of masculinity are constructed by men as ‘lost’ (Bennett, 2007; Chapple & Ziebland, 2002; Evans et al., 2011). In his UK research, Jackson (2016) identified a prominent ‘failed masculinity’ discourse which shapes constructions of aging, according to which older age may be considered the terminus of masculinity.

Images of ‘successful’ aging are featuring more prominently within mainstream media. But, historically, older age has been overwhelmingly portrayed as a time of depression and loneliness (Mulley, 2007). Thompson Jr (2006) also suggested that, often, media present solitary older men in an unfavourable light, “from being a dirty old man to a dispirited, solitary old man to a curmudgeon” (p. 637). When men *are* presented favourably, it is often in relationship with older women. The implicit assumption is that being ‘successful’ as an older man is contingent on having a significant (female) ‘other.’ As media representations reflect wider social-cultural discourses (Lyons, 2000), these presentations may shape the ways in which older men talk about themselves.



Because it has been relatively overlooked, and because of the negative discourses that dominate discussions about older masculinities, more research should focus on how masculinity and age intersect (Jackson, 2016; Tarrant, 2010). However, the power that has historically been associated with being male, middle-class, and Caucasian (Kimmel, 1993, 2005) and the ‘double standard of aging’ by which society is more forgiving to aging men than women (Sontag, 2018), counterbalance these negative representations. It is thus also important to examine the ways in which such power is exercised as men age.

There has been a relative lack of such qualitative research within A/NZ. Social constructionist research into this topic might augment existing quantitative data by contributing more nuanced understandings of masculinities in older age and exploring the unique expression of these within an A/NZ context. Such an approach is supported by the supposition that masculinities operate on global, regional, and local levels (Connell, 1995; Connell & Messerschmidt, 2005). It is important to begin to arrest the process of othering that features prominently in discussions about aging men. It is towards such understanding that this research reaches. In doing so, it should be acknowledged that the literature reviewed in the introductory chapters comes predominantly from Western perspectives. This is deemed appropriate in this instance, as this research is concerned with the ways in which masculinity and aging intersect within A/NZ, a Western country. Moreover, the participants in this research are primarily Caucasian, and although differences exist between local and regional masculinities, such Western influenced research provides the most relevant base for considerations of factors that may be pertinent to these participants.

Chapter One provides an overview of the baby boomer cohort to which the participants in this research belong, including consideration of socio-historical factors that may have influenced men of this age. It also considers theories within gerontology and discourses related to notions of ‘successful’ aging. Chapter Two turns to the other major construct of interest: masculinity. It considers some of the major theories of masculinity and approaches to studying this construct. Chapter Three explores some of the ways in which masculinity and aging intersect through consideration of the extant literature in this area. Chapter Four considers masculinity within a specifically A/NZ context by exploring dominant local or regional discourses and briefly considering their history.

The introductory chapters are followed by the presentation of the current research. Chapter Five outlines the social constructionist epistemology and methodological approach taken in this study, including consideration of my own role as a researcher in constructing meaning. Results, including themes and analysis of transcripts follow in Chapter Six. Finally,

Chapter Seven includes a summary and discussion of the results, followed by conclusions, limitations, and possible future directions for further research.

## Chapter One: Aging

### The baby boomers and the third age

It is instructive to explore cohort-specific values, norms, or discourses (M. W. Riley, 1987; Thompson, 1994) while recognising individual diversity. The age changes that are now occurring in A/NZ (and elsewhere in the West) are largely due to the aging of the ‘baby boomer’ generation –the large post-war cohort born between 1946 and 1964 (Fingerman et al., 2012). This group, spanning 19 years, differs from previous generations in marrying later; having fewer children - and at a later age; divorcing more frequently; and in experiencing greater participation of women in the workforce (Winston & Barnes, 2007). Also, unlike their parents and grandparents, they did not suffer through the hardships wreaked by two major world wars, or the depression of the 1930s.

The third and fourth ages are two proposed life stages that have been used to conceptualise the later years of one’s lifespan. They remind us of the importance of considering age in terms of culturally defined meanings and discourses, rather than (exclusively) chronological markers; they show that there are cultural dimensions and embodied physiological dimensions that interact in complex ways as men age. The third age refers generally to a point at which “the goal of the individual life plan is realised” (Laslett, 1987, p. 135). Conceptualisations of the third age recognise the benefits bestowed on the baby boomer generation, to which the third age is inextricably bound (Barnes, 2011). So too, the concept of ‘second modernity’ (Beck, 1992, 2004) and its ‘normalization of diversity’ (Jones & Higgs, 2010).

For baby boomer retirees who “reject that which is old because it is old” (Gilleard & Higgs, 2010, p. 122) the previous discourse of disengagement has been replaced with individualized notions of successful aging. Although a nebulous concept that may be defined “in terms of what it is not (pathology)” (Jones & Higgs, 2010, p. 1515, parentheses in original), ‘success’ is generally synonymous with activity. Jones and Higgs (2010) argue that older age is split by those who are subject to modernist notions of “decline and dependency” and the ‘third agers’ who embrace norms “organized around the reflexively constituted culture of fitness” (p. 1514).

However, choice regarding how one lives the third age, or the ability to choose early retirement, is moderated by financial resources and good health and mobility (Jones et al., 2010). The third age begins with the transition from working life into retirement (Gilleard & Higgs, 2002; P. Higgs & McGowan, 2013). These ‘golden years of adulthood’ (Barnes, 2011)

are characterised by increased leisure time enjoyed with relatively good health and solvency. Lifestyle choices are actively marketed to older people, and wage increases that have occurred steadily over the latter part of the 20<sup>th</sup> century facilitate consumption of this lifestyle (Gilleard & Higgs, 2002). The purchasing power of older people is sometimes referred to as the ‘grey dollar’ - reflected in the upsurge of films marketed to older audiences (Hamad, 2014) and visible, for example, in marketing research stressing the importance of catering to ‘the greydollarfella’ (Ogden-Barnes & Minahan, 2006). Baby boomers have enjoyed increased levels of education and the use of sophisticated technology, allowing them to access ‘cultural products’ to a greater extent than previous generations (Gilleard & Higgs, 2002).

These benefits suggest that the experiences of men over 65 may be overwhelmingly positive. Indeed, Higgs and McGowan (2013) argue that if a man is able to participate in the third age following retirement, then it may be inaccurate to consider him ‘demasculated’ (p.28). Nevertheless, at this time “a gendered bodily dimension becomes apparent” as men begin to face “issues of capacity, fitness, and virility as challenges” (P. Higgs & McGowan, 2013, p. 22).

### **The Fourth Age**

Some have viewed the fourth age as determined by chronological age – beginning around the mid-eighties when physical frailty may challenge independence (Laslett, 1991). Others have argued for a culturally determined view of the fourth age as an essential corollary to the commodification and consumption of the third; a symbolic ‘black hole’ (Gilleard & Higgs, 2010), a point of ‘no-return’ represented by abjection, decay, and dependency (Gilleard & Higgs, 2011). For men, this dependency “reverses previously existing power relationships and social boundaries around the body and care of the body” (Higgs & McGowan, 2013, p. 22). It challenges control, physical autonomy and identity (Baltes & Smith, 2003). Because of these negative views of the fourth age, some do not financially plan as well as they might for the fourth, seeing it as ‘wasted expenditure’ (Price et al., 2014). Anticipation of the menacing spectre of ‘abjection’ and decay that characterises the fourth age can result in fear (Jackson, 2016) and a desire to ward it off (Gilleard & Higgs, 2011, 2013). The cultural construction of the fourth age may account for the age-related anxiety that occurs reasonably early in a person’s life (Shirani, 2013).

Gilleard and Higgs’ (2013) bleak assessment of the fourth age centres on its status as a ‘social imaginary.’ Physical decline might necessitate greater reliance on others but dread of this life-stage appears to belong almost exclusively to those not currently living it; many people

aged 86-99 have positive experiences (Stathi & Simey, 2007) and men of this age do not necessarily express a loss of agency, control or dignity (Lloyd et al., 2014). However, if the fourth age is (partly) defined by loss of control, one might argue that these participants belong to the third age. Indeed, the perseverance Lloyd et al. (2014) identified in their participants (aged 70-85+) kept them “from being sucked into the black hole” (p. 17).

The third and fourth age concepts point to the importance of cultural expectations. These expectations, as has been discussed, interact with physiology, health, mobility, finances, and many other individual elements to demonstrate the complexity involved in discussions of older age and the variability that is frequently observed amongst those of the same cohort. As has also been shown, the ‘window’ of the third age has broadened with improvements in standards of living, such that the dependence that characterises the fourth age may never arrive for many and thus remains a social imaginary.

Before exploring the contributions of formal gerontology theories to understandings of aging, it is important to acknowledge the importance of class to discussions of the third and fourth ages. As briefly mentioned, the consumption practises that characterise life within the third age are dependent on one’s financial resources. There are many who perhaps cannot afford to live the type of lifestyles that have become synonymous with dominant notions of third age lifestyle choices. As Gilleard and Higgs (2002) have argued, “‘third ageism’ can be seen as the more conspicuous manifestation of wealth in later life”; this ‘manifestation’ is made more obvious when the potential experiences of “those pensioners without such assets” (p. 372) are considered.

Although NZ has traditionally been seen as an egalitarian, ‘classless’ society compared to other western countries (e.g. the UK) rising inequality has been noted by research considering income levels and home ownership (Arrowsmith et al., 2017; Carr et al., 2018). In their British work, Gilleard et al. (2005) acknowledge that class “continues to act as a material factor in the determination of discretionary spending income” (p. 306). Given this, it is possible that men who have obtained low incomes throughout their lifetimes might find the third age relatively inaccessible, or else may enter the fourth age sooner than other men. In addition to not possessing the financial resources to partake in leisure activities or other forms of third-age consumption, such men are more likely to have lacked access to healthcare, or else may have worked for much their lives in physically demanding roles, such as manual labouring – factors that may contribute to poorer health (Williams, 2008) and disability retirement (Virtanen et al., 2017).

In the following section, theories of aging are explored for what they might contribute to considerations of aging. As many of these do not explicitly acknowledge class, it is important to retain wealth and access to resources as important considerations with the potential to influence the ways in which these theories might be applied.

### **Theories of Aging within Gerontology**

From a social constructionist perspective – such as that espoused by Gergen (e.g., Gergen & Gergen, 2008), discourses shape the understandings of aging. The third age is characterised by discourses of activity, fitness, and enjoyment; the fourth, by discourses of decline, dependency, and disengagement. In a circular process, these discourses have also infused formal theories of aging within the field of gerontology. As they attempt to explain and ‘capture’ aging, such theories reflect the socio-cultural values and concerns of their historical context; they construct what ‘aging well’ or ‘successful’ aging means. A brief overview of these theories will thus be provided in this section.

Although scholars have been concerned with aging for millennia, (Mulley, 2012) it is only in the 20<sup>th</sup> century that gerontology emerged as a field of its own (Achenbaum & Bengston, 1994). Within the field, even the ostensibly simple concept of ‘aging’ has been contested (Franklin & Tate, 2009). The biological notion of ‘senescence’ - the declining ability to adapt to the demands of one’s environment – is alone insufficient to encompass the varied psychosocial and cultural meanings that have developed around, and shape, the aging process (Franklin & Tate, 2009). Nevertheless, biological discourse exerts its influence as a ‘regime of truth’ (Foucault, 1980; Rose, 1999; Wetherell & Edley, 2014). Mitigating or slowing senescence has thus dominated the agenda within mainstream discourse, and the ability to resist senescence has become synonymous with dominant notions of successful aging (eg., Rowe & Kahn, 1997).

As Chapman (2005) asserts, the biological perspective of Rowe and Khan’s (1997) ‘successful aging’ model is influenced by Erikson’s (1959) individualistic, agentic view of human development, culminating ideally in an ‘end-point’ of self-integration (ego-integrity in Erikson’s parlance). For Chapman (2005), other major gerontology theories share this underlying basis: disengagement theory (Cumming & Henry, 1961); activity theory (Havighurst, 1961); continuity theory (Atchley, 1971, 1989); resource based theories such as the selective optimisation and compensation model (SOC; Baltes & Baltes, 1990); and social-environmental theory (Rosow, 1973). Thus, despite their differences, Chapman (2005) includes these theories under the umbrella of a ‘first’ dominant narrative within gerontology.

Each is an individualistic perspective that emphasises the importance of lifestyle choice in achieving 'self-integration.' In this way they accord the with neo-liberal, consumerist values that have spurred the anti-aging industry (King & Calasanti, 2006)

Alternatively, "aging well" might be considered "an open-ended process evident in individuals' ongoing negotiation of multiple selves amid changing levels of resources and engagement and amid the life-course transitions and events that characterize later life" (Chapman, 2005, p. 10). This view is characteristic of the other major, 'second' narrative (Chapman, 2005) or 'transformation'; (Lynott & Lynott, 1996) – so called for its critique of the first set of understandings. The narrative challenges the possibility of self-integration and takes a wider purview in critiquing the socio-historical context of these theories. It was ushered in by social phenomenologist, Marxist, and (later) critical and feminist schools of thought. This critical gerontology approach examines assumptions made by formal theories of gerontology and considers how they might perpetuate discourses that serve political and economic interests (King & Calasanti, 2006; Lynott & Lynott, 1996). Aspects of both narratives will be summarised briefly below, beginning with formal theories of aging.

### ***Disengagement theory***

Disengagement was an early theory in gerontology, and the idea of disengagement persists as a discourse which constructs older people as a 'burden' or a 'problem' (King & Calasanti, 2006). Cumming and Henry's (1961) formal disengagement theory (DT) has been summarised as an "inevitable" severance of the "relationship between the individual and society" (Achenbaum & Bengtson, 1994, p. 758). It involves gradual disengagement from society and a turning inwards (Adams et al., 2011) to ensure the harmonious functioning of the social system (Fry, 1992; Gubrium, 1972; Lynott & Lynott, 1996). Individuals purportedly benefit from increased leisure time and relief from the pressure to fulfil normative roles; in turn, society benefits because the roles vacated by older people can be taken up by those who are younger (Atchley, 1971; Cumming, 1964; Havighurst & Albrecht, 1953).

However, empirical validation of DT has largely been unsuccessful (Fry, 1992; Hochschild, 1975) due to limitations that beset attempts to develop comprehensive, yet testable and empirically valid theories as a whole (Lemon et al., 1972). Disengagement theory universalised and oversimplified aging by neglecting consideration of idiosyncratic factors such as disposable income and social support, and is compromised by the many examples of those who refuse disengagement (Achenbaum & Bengtson, 1994; Lynott & Lynott, 1996). It has also been criticised for its discourse of inevitable decline and withdrawal in older age and

neglect of power imbalances between young and old, which sometimes force older people into withdrawal (Dowd, 1975). Its tenets also presupposed that the role of men (in the 1960s) was 'instrumental' in contrast to the 'socio-emotional' role of women; and that men's central role was work but for women was 'marriage and family life' (Cumming & Henry, 1961, pp. 213-218, in Achenbaum & Bengtson, 1994). Disengagement theory has influenced subsequent theorising, such as gerotranscendence theory (eg., Tornstam, 1997), which views successful aging as the ability to 'transcend' through greater wisdom and introspection. However, this too has been criticised for ignoring diversity (Jönson & Magnusson, 2001).

Disengagement theory's 'demise' may be due to its incompatibility with economic imperatives. For public policy makers, the increasing proportion of older people requires that they remain productive contributors to the economy rather than 'draining' society's economic resources. This issue is reflected in recent political debate around A/NZ's superannuation entitlement age which, at 65, is often argued as unaffordable; and in the World Health Organisation's (2003) policy guidelines on active aging, designed to manage a burgeoning older population worldwide.

### ***Active aging: Activity theory***

By contrast, activity serves the economic interests of western societies, although recognition of its importance has existed at least since the Enlightenment (Katz, 2000). Despite 'activity's' long history, formal explication of Activity Theory (AT) did not occur until its refinement by Lemon, Bengtson, & Peterson (1972). This was a direct response to DT (Chapman, 2005). Although AT is often viewed as the antithesis of DT (e.g., Khullar & Reynolds, 1990), both theories acknowledge a general decrease in the rate of social interaction with age. The main theoretical difference lies in the degree to which the individual is seen as *choosing* withdrawal (Dowd, 1975). Proponents of AT saw withdrawal as imposed on unwilling individuals, while DT supposed greater individual will to disengage (although this ignores the ways socio-cultural expectations shape individual 'will'). In A/NZ, the resistance to disengagement is visible in the abandonment of a compulsory retirement age.

Each theory also maintains that key roles need to be replaced by more 'appropriate' roles as one ages (Havighurst, 1968; Chambre, 1984). Activity theory maintains that older people have the same social and psychological needs as those in middle age (Boudiny, 2013) and so must retain, or replace their social roles when they are lost (Burbank, 2013). When this is not possible, a loss of life satisfaction, self-esteem, morale, wellbeing, or health may ensue.



However, as with DT, confirmation of AT (and the role of activity in older people's lives) has proven elusive (Fry, 1992). Inconsistencies in defining or parsing out the numerous constructs utilised in research have beset empirical investigations (Hoyt et al., 1980; Menec, 2003; Okun & Stock, 1987) and confounded attempts at a unified, universal theory (Boudiny, 2013). Despite the long-standing, inherent assumption that activity in later life is essential for 'successful' aging (Katz & Calasanti, 2015), 'activity' remains a vague and variable concept. It encompasses formal vs informal, and social vs solitary activity - with no clear advantages found between them (Menec, 2003; Okun et al., 1984). The waters are muddied further when considering whether physical functioning, life-satisfaction, self-esteem, happiness, wellbeing, level of productivity, or any combination of these outcome measures is used in studies exploring the benefits of activity. A further difficulty is evident in considering causal directions between factors such as social activity and improved functioning (e.g. Lennartsson & Silverstein, 2001).

Despite an inability to specify what counts as 'activity', empirical evidence points to the benefits of various types of activity in later life (Walker, 2002). But the quality of interpersonal relationships appears more important for health, longevity, and life satisfaction than frequency of activity (Everard, Lach, Fisher, & Baum, 2000; Litwin & Shiovitz-Ezra, 2006; Menec, 2003; Seeman, Berkman, Blazer, & Rowe, 1994). High levels of productivity – paid or otherwise – have also been revealed as important (Glass et al., 1995; Menec, 2003). Indeed, it is hard to argue with the testimony of older persons themselves who attest to the importance of social activity, health, and fitness (Duay & Bryan, 2006); and the many studies emphasising the benefits of retaining good cognitive and physical functioning, staying free from disability and disease, and involvement in social and productive activities (Bowling, 2008; Rowe & Kahn, 1997).

'Activity' is complicated by other considerations. For instance, personality has been invoked to capture the complexities of aging and explain contradictory results regarding levels and types of activity (Havighurst, 1968; Neugarten, 1973; Neugarten et al., 1996). Although personality is itself a slippery construct, it may help to explain, for instance, why some men are not adversely affected by solitariness (e.g. Davidson, 2004) while others are (Steptoe et al., 2013). Additionally, education and socioeconomic factors may be important to wellbeing as predictors of participation in activity (Chambre, 1984; Dowd, 1975; Hoyt et al., 1980).

An emphasis on health and activity in older life might be important for challenging the discourse of inevitable decline and dependency that once epitomised aging (Katz, 2000; Rowe & Kahn, 1997; Walker, 2009). However, 'activity-as-success' discourses may ignore structural

inequalities and serve to promote ideals that cannot always be met (Boudiny, 2013; Lassen & Moreira, 2014; Ranzijn, 2010; Rozanova, 2010; Venn & Arber, 2011). They have been considered reflective of narrow, middle class, American values, and criticised for promoting the extension of working life for economic and productive reasons (Foster & Walker, 2015; Lowry, 1979). Arguments that active aging makes both 'moral' and 'economic sense' (e.g., Walker, 2002, p. 122) are consistent with neo-liberal values reflected, for instance, in the retraction of the welfare state (Wrenn & Waller, 2017). Moreover, the conflation of activity and economic productivity (Boudiny, 2013) ostracises those who are unable to reach these benchmarks because of material or physical constraints and constructs this inability as personal and moral failure (Bowling, 2008; Ranzijn, 2010; Stephens, Breheny, & Mansvelt, 2015).

Some researchers (eg., Rowe & Kahn, 1987; Walker, 2002) have thus proposed various definitions of productivity to challenge economic success as its only legitimate measure. Herzog and Morgan (1992), and Glass et al. (1995) have argued that “housework, yard work, child care, paid work, and volunteer work” (Glass et al., 1995, p. 68) should count as productive. Indeed, a broader definition of ‘activity’ is beneficial in allowing greater individual freedom in choosing activities; or ‘permitting’ individuals to define success in terms of individual capability (Stephens et al., 2015). There is a need to include *all* older people, including those who are ‘frail and dependent’ (Walker, 2002, p. 124); to consider active aging as preventative, not merely remedial; as intergenerational; as respectful of ethnicity and diversity; and as empowering, by allowing individuals to define activity in their own terms.

### ***Continuity theory***

Continuity theory attempted to reconcile activity and disengagement theories based on observations that older people appear to maintain earlier patterns (if not the same rate) of activity in retirement, rather than drastically changing these (McGuire & Norman, 2005; Nimrod & Kleiber, 2007). The theory was originally developed by Rosow (1973) as a general theory of aging across the lifespan, beginning in childhood. Atchley (1972, 1989) took up the theory to specifically focus on the ways middle aged and older people attempt to adapt to changes wrought by aging.

Continuity theory predicts significant variation in the amount and type of activity engaged in by older people (Agahi et al., 2006). It is supported by greater empirical evidence than disengagement and activity theories (Chambre, 1984; Fry, 1992), perhaps because it is descriptive rather than explanatory (Lynott & Lynott, 1996; Nimrod & Kleiber, 2007).

Continuity theorists refrained from defining ‘successful’ aging as either activity or disengagement (Agahi, 2006). Nevertheless, its implicit assumption was that ‘aging well’ “was achieved through consistency of self” (Chapman, 2005, p. 12). This ‘internal structure’ (Atchley, 1989) is a result of the ‘internalisation’ of “a lifetime of habits, behaviours, and attitudes” (Utz et al., 2002, p. 522); a stable ‘internal structure allows adaptation to external structural changes in “physical and social environments, role relationships, and activities” (Atchley, 1989, p. 185). Evaluation of current life satisfaction is based on comparisons with previous functioning; individuals find too much continuity, too little, or an optimum amount. Change thus occurs as an interplay between internal and external factors.

However, one may attempt to change internal or external structures (or both) if there is a lack of fit between them – as when individuals struggle to cope with the demands of the social environment (Atchley, 1989; Chapman, 2005). Challenges arise in the form of changes to functional status (Agahi et al., 2006). In such cases, continuity can be considered in symbolic or relative terms. Becker (1993) found that even a semblance of continuity in the face of significant set-backs was beneficial for stroke survivors. For instance, watching sport on television may provide a sense of continuity for former sportsmen. Additionally, “material and interpersonal resources” are important in understanding and meeting challenges such as spousal death (Utz et al., 2002, p. 531).

With regard to masculinity, internal factors might include one’s sense of what it means to be masculine (Thompson Jr & Langendoerfer, 2016). ‘External’ factors might include ideals, discourses or expectations circulated within a culture or society, which define certain behaviours as ‘masculine.’ Abrupt changes in masculine status or function might challenge one’s sense of continuity, as found in literature related to prostatectomies (eg., Oliffe, 2005).

However, such a distinction between external and internal structures is blurred when a poststructuralist perspective is adopted (Walkerdine & Blackman, 2008). From this perspective, a key problem with continuity theory lies in the supposition of a self that remains stable throughout life, and which is ostensibly separable from an external structure. Notions of successful aging and/or masculinity, for instance, may be relatively *unstable* and variable between spatial and temporal contexts. At the heart of this issue lies an epistemological quandary regarding ‘self’ and the role of agency in people’s lives. This will not be resolved here, yet there may be a ‘middle way’ as suggested by Archer (2000), who emphasises that “we must neither under- nor over-privilege human agency in our analytical approach” (p. 21).

### **Socio-environmental theory**

The inability of the aforementioned ‘classical’ theories to adequately account for diversity (Bengtson et al., 1999; Maddox, 1987) spurred theorists to search for more nuanced alternatives, such as socio-environmental theory (Gubrium, 1972). This ‘ecological’ theory (Lawton & Nahemow, 1973) attempted to transcend the “simplistic dualism of disengagement versus engagement, or activity versus inactivity”(Fry, 1992, p. 295) by exploring the interrelationship of the individual with their environment(s). Well-being depends on congruence between one’s *social context* - environment - and *individual context* – one’s competence to navigate its demands (Lawton, 1985). It argues that a homogenous ‘sub culture of aging’ (A. M. Rose, 1962) emerges, which demands less individual flexibility than the heterogeneous contexts of younger, professional life. Social contexts are managed through individual resources such as “good health, solvency, and on-going social support (e.g., having a living spouse)” (Gubrium, 1972, p. 282).

The dimensions of social and individual context are similar to continuity theory’s internal and external structures. However, Lawton (1985) maintained that there is no “steady state of balance between personal competence and environmental press” (p. 504). Individuals seek equilibrium by accepting or rejecting an environment based on their ability to cope with its demands. They may also attempt to modify their environment and its norms through individual or collective action as their individual resources allow (Fry, 1992).

As Fry (1992) argued, SET improves upon disengagement, activity and continuity theories by considering an internal and external dimension to each. The internal components “are the person’s tendencies to act in a relatively fixed way toward persons or events in the environment”; the external components “are the social definitions of behaviour and action expected of individuals” (p.296). Greater circularity between individuals and their environment is assumed than in more linear theories; as ‘self-integration’ is achieved through changing social contexts, rather than the ‘consistency of self’ central to continuity theory (Chapman, 2005). Nevertheless, the conceptual duality between person and environment is recognised and challenged by Lawton (1989); who argued that environment is always interpreted. That is, the person and environment are always “unitary” (p. 58).

### ***Goal oriented theories: Selective optimisation with compensation (SOC) and Motivational Theory of lifespan development***

The motivational theory of lifespan development (Heckhausen et al., 2010) and selective optimisation with compensation (Baltes & Baltes, 1990) models each

theorise development and ‘success’ in terms of goal attainment. Selective optimisation with compensation (SOC) attempts to incorporate biological and psychological elements into a meta-model including three major components: selection, compensation, and optimisation (P. B. Baltes & Baltes, 1990). It defines successful aging as “minimisation of losses and maximisation of gains” (M. M. Baltes & Carstensen, 1996).

The amount of activities one can select is necessarily constrained. Thus, ‘selection’ involves choosing specific, individualised goals. ‘Elective’ selection is based on personal preference for one option over others, whereas ‘loss-based’ selection is induced by a loss of the means (e.g. physical capability, solvency) for meeting one’s goal(s) (Freund & Baltes, 1998, p. 531).

Although SOC is purported to apply across the lifespan, it takes on more importance in older age (P. B. Baltes & Baltes, 1990) as functional capacity becomes more limited and greater selectivity is required. Once a goal is selected, optimisation maximises the potential for its realisation. For instance, if improved health is a goal, optimisation “may mean for one person to exercise more frequently, for another to diet, and for a third person to reduce stress” (M. M. Baltes & Carstensen, 1996).

The motivational theory of human development (Heckhausen et al., 2010) goes some way towards understanding additional factors that may influence goal selection or optimisation. Social structure(s) such as social class, race and ethnicity, gender, and age have also been recognised as “passive mechanisms conceptually set apart from but working hand-in-hand with ‘active’ processes of selection and failure management” (Heckhausen & Schulz, 1993, p. 289). These ‘structures’ are embedded in social institutions including education and superannuation age policy. Choice is constricted, and enabled, by what society has constructed as developmentally appropriate (Heckhausen, Wrosch, & Schulz, 2010, p. 34). Although there is no ‘retirement age’ in A/NZ, the age at which one can receive government superannuation may be a developmental milestone that constricts choice through societal expectations to no longer participate in the workforce. However, if met, such developmental milestones remove some of the burden of decision-making, as decisions are already ‘made’, to a certain extent, by society (Heckhausen & Schulz, 1993).

With age, an individual’s ‘control capacity’ declines. This is defined as one’s ability to “adjust to, cope with, and take advantage of the changing

opportunities and constraints” (Heckhausen et al., 2010, p. 34). As with SOC theory, motivational theory prioritises the role of selection and compensation. These processes are important in dealing with inevitable setbacks not only in older age, but throughout life (Heckhausen et al., 2010; Heckhausen & Schulz, 1993).

To maximise the chances of success while minimising the impact of failures, individuals are hypothesised to use ‘primary control strategies’ - modifying the world to conform to one’s wishes - or ‘secondary’ strategies - changing oneself to conform to the environment (Weisz et al., 1984). Examples of the former include “persistence in goal striving or the investment of time and effort if obstacles emerge” while the latter include “positive reappraisal, downward comparison, attributional bias, or goal disengagement” (Wrosch et al., 2000, p. 388). Men of a certain age may thus compare themselves to other men of a similar age who are less physically capable or less wealthy, for instance.

Through social ‘structures,’ MT attempts a more nuanced understanding of constraints on choice. However, like SOC, it largely neglects the role of discourse in prompting an individual to select certain goals over others – such as those that promote certain lifestyle choices as more or less desirable (Stephens et al., 2015). Goals, and the ‘losses’ they are intended to compensate for, may be gendered. Dominant discourses of masculinity might render certain selections more or less acceptable - as seen in research suggesting that men seek help for health complaints less readily than women (Galdas et al., 2005). There are also unanswered questions regarding possible gendered differences in the deployment of control strategies. Hegemonic masculine discourses may promote primary control, for instance. If this were so, age would represent a particular challenge to men, and require greater adjustment.

### **‘Second wave’ alternatives**

The *active aging*, or *positive aging* discourse is influenced by a neo-liberal emphasis on individual responsibility to manage one’s health and aging (Crawshaw, 2007; Ojala et al., 2016; Stephens et al., 2015) and complements the decline of the welfare state that neo-liberalism has ushered in (Katz, 2000). This type of discourse thus serves policy makers seeking to manage the looming ‘grey economy’ by increasing the productivity of older people, reducing dependence on public healthcare systems, and boosting investment in the anti-aging

industry. Indeed, much research has discussed the benefits of active aging in economic terms (Everard et al., 2000; e.g., Glass et al., 1995).

The second ‘transformation’ (Lynott & Lynott, 1996) or narrative (Chapman, 2005) within gerontology is a critical, poststructuralist, approach. It critiques the alienating influence of a ‘one size fits all’ approach to successful aging (M. M. Baltes & Carstensen, 1996; Boudiny, 2013; Stephens, 2017) and the material effects that discourse can have on individual bodies (Katz, 2000). As Foucault (1995) argued (in Dreyfus & Rabinow, 2014) discourses become manifest in the body in a process of self-surveillance. For Katz (2000) active aging discourse suggests that aging bodies must be ‘busy bodies,’ and that definitions of ‘acceptable’ activities are influenced by moral attitudes. Likewise, Ekerdt (1986) critiqued the continuation of the ‘busy ethic’ into retirement, arguing that those approaching retirement should be re-socialised to see leisure as acceptable. Embodiment, discourse, power, and the interconnections between these, are therefore of central importance to considerations of how age and masculinity intersect (Fleming, 1999; Jackson, 2016; Oliffe et al., 2013; Twigg, 2004).

Embodiment, which will be discussed further in the following chapter, refers to the processes which govern how bodies are experienced, modified, presented, and imagined. The issue of embodiment presents a difficulty (already prefaced and returned to in subsequent discussions) in reconciling the discursive with the material. As discussed, this difficulty permeates many of the formal theories of aging which, arguably, often discount discursive influences. Marshall’s (2005) symbolic interaction approach offered a solution to the normative bias that characterises approaches such as disengagement, activity, and continuity theories. Although distinct from social-constructionism, its recognition that ‘self’ is constructed in interaction with others shares a common philosophical root stemming from Mead and Schutz (Segre, 2016). Marshall (1979) emphasised that individuals seek to control their passage into older age and inevitable death, but this is managed in interaction with other agents of socialisation, such as “those who socialize the aged into homes for the aged and hospitals” (p. 356). More than disengagement, activity or continuity theories, symbolic interactionism attempted a balance between human agency (control) and the restrictions placed on that agency “due to the power structures and patterns of inequalities in society” (Bowling, 2008, p. 293).

The personal capability approach (Sen, 1993) shifted the focus away from defining successful aging as physical ability to instead focus on ‘what people can achieve, with support, despite the limitations of physical health changes’ (Stephens et al., 2015, p. 727). Stephens et al. (2015) also acknowledge the role of discourse in shaping how older people construct aging. Discourses promote values that people

take up or resist in interaction with others, as per social-interactionism and social constructionism. These approaches attempt to incorporate – and reveal as inseparable - both the individual human actor and the ‘external’ forces that constrain their actions.

As has been seen in this chapter, many theories have been espoused to make sense of aging - irrespective of gender. There are considerable overlaps between some of these theories, as well as important discursive differences. As such, a critical ‘second wave’ approach is favoured in this research for its critique of the ways in which gerontology theories both reflect and perpetuate discourses of aging. The next section turns to consideration of masculinity – an equally complex construct. In doing so, it outlines some of the major approaches to gender in general, and masculinity more specifically.



## Chapter Two: Theories of Masculinity

In the interests of identifying a suitable methodological and theoretical framework to guide the current research, several theories of masculinity will now be critiqued. These include role-based theories, gender as performance, hegemonic masculinity, precarious masculinity, and the notion of masculine capital. While there are similarities between many of these theories, there are also differences that should be heeded in explorations of older men's masculinities.

### Sex Role Theories

Sex role theories draw a distinction between biological sex and gender (Messner, 1998) by considering sex roles as socio-cultural norms rather than intrinsic, biological characteristics (Hammond, 2014). The congruence model and gender role identity paradigm (GRIP) asserted that wellbeing is enhanced through adherence to one's socially determined gender role (Levant, 2011). However, these promulgated a narrow, polarised framework outside of which alternatives such as homosexual orientation or non-traditional career choices, were constructed as deviant (Cochran, 2010; Constantinople, 1973).

The androgynous model was more nuanced in suggesting that masculine and feminine roles are complementary (eg., Bem & Lewis, 1975), and that androgyny offers greater flexibility in negotiating a broader range of social situations (Ballard-Reisch & Elton, 1992, p. 293). Sinnott (1984) suggested that sex-roles become more androgynous as people age because androgyny is more adaptive to age-related demands. This maybe more pronounced for men than women (Hyde & Phillis, 1979) because life changes force renegotiations of traditionally defined masculinity (Emslie et al., 2004).

The male sex role has typically been defined in negative terms (O'Neil, Helms, Gable, David, and Wrightsman, 1986) as naturally dysfunctional, limiting and harmful (Eisler & Blalock, 1991; Verbrugge, 1985). *Sex role strain* (SRS, Pleck, 1995, 1976) and *gender role conflict* (GRC, O'Neil et al., 1986), for example, considered the psychological, internalised conflict between the limitations of gender roles and individual desires for 'actualisation'.

Gender role conflict has remained popular in explaining men's reluctance to seek help for physical problems (Vogel et al., 2014); psychological problems (Levant et al., 2011; Nguyen et al., 2012; Pederson & Vogel, 2007; Shepherd & Rickard, 2012); alcoholism (Uy et al., 2014) or problems related to drinking (Groeschel et al., 2010); homophobia (McDermott et al., 2014) and gay men's self-stigma (Sánchez et al., 2010). Middle aged and older men who exhibited higher rates of GRC appear to experience greater dissatisfaction with their body (T. Murray & Lewis, 2014), and Pompper (2010) found that men often defined their roles

“internally in terms of Character, Attitude, and Confidence/Assertiveness - features that underscore the ongoing salience of success, power, and competition (SPC) in GRC theory” (p.688).

The appeal of SRS, GRC, and other role theory variants resides in their ability to be quantified (Wetherell & Edley, 2014) through scales (Kachel, Steffens, & Niedlich, 2016; Levant, Hall, & Rankin, 2013; Reynolds, Fisher, Dyo, & Huckabay, 2016). However, analyses of such scales equivocate as to their ability to ‘capture’ gender (Ballard-Reisch & Elton, 1992; Pedhazur & Tetenbaum, 1979; Whitley Jr, 1985).

Some have thus attempted to reconcile gender ‘roles’ with acknowledgement of the socially constructed nature of gender (e.g., Beaglaich, Sarma, & Morrison, 2014; Kachel et al., 2016; Uy et al., 2014). But continual development of new scales reflects gender’s instability, as researchers try to keep pace with changes in the ways gender is understood. Such fluidity is inimical to static role or trait-based theories. Moreover, measures based on sex roles fail to accurately measure variation within men in “ecologically valid situations” (Wetherell & Edley, 2014, p. 360); men may construct masculinities in different ways based on contextual determinants.

Role theory has also been criticised as a top down, ‘cognitive’ approach which oversimplifies behaviour as internalized ideology (Edley & Wetherell, 2014; Wetherell & Edley, 2014). Sex role theories do not adequately account for the reasons gendered “sanctions” are placed on the individual by others; and wrongly posit change as always coming from ‘outside’ gender, or else from inside the person (Connell, 1985a). Measures based on this binary framework thus reify gender by forcing it into two “role containers” (Kimmel, 1986, p. 521), which are static, ahistorical (Kimmel, 1993), and limit space for renegotiation. It ‘constructs the objects of which it speaks’ (Foucault, 1972) as a discourse which itself delineates gender; one either adheres to a gendered role or one does not (Connell, 1995; Courtenay, 2000). Moreover, for Connell (1985) the very term ‘sex role’ conflates biology with the dramaturgical aspects of gender, so that gender becomes an elaboration of naturally occurring differences, rather than questioning that biological anatomy should necessarily have qualities attached to it.

Role theory has also been decoupled from its original liberating agenda to legitimate and entrench male privilege. The men’s liberation movement embraced ‘gender symmetry’ - the belief that the male sex role impacts both men and women equally (Messner, 1998). This helped legitimise a ‘feminist backlash’ (Faludi, 1991; Gill, 2011; McRobbie, 2009) – a rejection of feminism and feminists that turned a blind eye to the “institutionalised privileges

that men still enjoyed at women's expense" (Messner, 1998, p. 262). The ensuing 'crisis of masculinity' was thus based on disregard for the patriarchal power and privilege that dominated gender relations for centuries and continues to do so (Gill, 2016; Heartfield, 2002).

'Methodological pluralism' has been mooted as a possible compromise for the desire to capture gender while acknowledging the difficulties in doing so (eg., Hammond, 2014; Mahalik, 2014). But Edley and Wetherell, (2014) and Wetherell & Edley (2014) pinpoint a methodological impasse between role theory and discursive approaches: the questionnaires and rating scales upon which role theories rely assume that participants' answers represent what they "really think", while ignoring the role of interaction in constructing gender through a "series of performative acts" (Edley & Wetherell, 2014, p. 376).

### **Gender as Performance**

The notion that gender is a performance emerged from a social-constructionist perspective. It focusses on "gendering processes" (Poggio, 2006, p. 225) rather than merely describing the results of gendering, as role theories do. West and Zimmerman (1987) 'freed' understandings of gender from the psychological (i.e., individual) into the social realm. They proposed distinctions between sex, sex category, and gender. Sex is ascribed at birth according to genitalia. Sex category is visible 'evidence' that one must belong to either sex based on appearance or behaviour; from "socially required identificatory displays" sex is assumed. "Gender" refers to activities that "bolster claims to membership in a sex category" (i.e., feminine vs masculine behaviours, p. 127). Differences between the genders are not "natural, essential, or biological" (p. 137) but performance of gender in socially sanctioned ways becomes a reinforcement of gender differences as naturally occurring. One cannot avoid being judged according to the extent to which one subverts or conforms to gendered norms. Performance is thus mandatory and inevitable (Deutsch, 2007).

West and Zimmerman's (1987) notion of performance refers to that which is carried out by a pre-determined body. But for Butler (1990) the body itself is performance; there is no body that exists prior to discourse, and discourse creates the body itself (Butler, 1990, 1993). Gender is "performatively constituted by the very 'expressions' that are said to be its results" (Butler, 1990, p. 33, in Poggio, 2006, p. 227).

Biology is a powerful discourse through which physiological differences are reified as essential; and the discourse of biological reproduction is used to show that anatomical differences naturally place individuals in one of two categories. The penis becomes erroneously conflated with the phallus, and becomes the *natural* basis for male power, upon which other

qualities that privilege men are discursively built. This depends on “women signify[ing] the Phallus through ‘being’ its Other, its absence, its lack, the dialectical confirmation of its identity” (Butler, 1990, p. 56).

Thus, the penis is the primary signifier of distinction (Martino & Pallotta-Chiarolli, 2003; Potts, 2000). For Schippers (2007), “Western constructions of heterosexual sex still reduce it to penetrating and being penetrated and that relation is consistently constructed as one of intrusion, ‘taking,’ dominating” (p. 90). Thus, the conflation of the phallus and the penis has ramifications for men when the penis and its operation as a symbol of sexuality and power is threatened or compromised. As such, men who have had prostatectomy induced impotence are liable to question their masculinity (Fergus et al., 2002; Oliffe, 2005). But phallic power also symbolically manifests in other ways. Citing Buchbinder (2002), Oliffe (2005) asserts that “older men transfer their power from the body to other aspects of their life such as family, social status, accumulation of wealth and consumerism” (p. 2251).

However, inconsistency in Butler’s theorising led to confusion as to how to apply her ideas in practice. Butler argued that there is no ‘doer behind the deed,’ while elsewhere implying a subject that could be said to pre-exist action (Brickell, 2005). Some have thus suggested incorporating Butler’s ideas with Goffman’s analogy of the stage to theorise social action as performance by social ‘actors’ (Brickell, 2005; Huey & Berndt, 2008). Each theorist views gender as non-essentialist; each sees the successful performance of gender as a strategy to gain prestige or acceptance in social life and unsuccessful performances as a cause of ostracism and censure (Huey & Berndt, 2008).

A key difference lies in the extent to which these theorists ascribe agency to the individual (Brickell, 2005). Goffman’s extended metaphor sees ‘actors’ preparing for performance behind the scenes. However, agency is limited by ‘frames’ which govern performance by providing a lens through which performances are judged. The notion is thus similar to social context. There is a strong pressure to behave, act, or perform in ways that will be judged favourably. While Goffman’s ideas are useful, Butler’s contributions provide a more explicit focus on gender and a disruption to the heteronormative assumptions in Goffman’s theorising (Brickell, 2005).

Considering later life performances of masculinities, it is possible that certain contexts frame the masculine qualities identified by Schippers (2007) as desirable (i.e. taking, dominating, or intruding). Older men may experience pressure to behave in these ways in certain contexts. Alternatively, it is feasible that older age provides a frame that does not apply the same standards by which younger masculinities are judged. In other words, it is possible

that men are not expected to be physically ‘dominant’ (for example) in older age. This may, in fact, account for them no longer being considered masculine (Twigg, 2004). In considering which behaviours might be judged favourably within different contexts - and why - the theory of hegemonic masculinity has utility. This theory helps explain why some versions of masculinity might be more appealing than others. It is explored below.

### **Hegemonic Masculinity**

Hegemonic masculinity (Connell, 1995; Connell & Messerschmidt, 2005) emerged in the early 1980s as an important, pro-feminist, systemic approach (Demetriou, 2001) which views gender relations as a system of power dynamics. It is one of the most widely embraced masculinity theories (Connell, 1995; Connell & Messerschmidt, 2005) with implications for a range of behaviours including drinking (eg., Peralta, Steele, Nofziger, & Rickles, 2010), risk taking (eg., Barrett, 1996; Miller, 2008) and health seeking (eg., Courtenay, 2000).

Gramsci (1971) originally conceptualised hegemony to explain how the ruling class exercises power over the working class through “the ability to impose a definition of the situation, to set the terms in which events are understood and issues discussed, to formulate ideals and define morality” (Donaldson, 1993, p. 645). Notwithstanding Donaldson’s use of the word ‘impose,’ hegemony relies on consent rather than overt coercion.

In Connell’s appropriation of hegemony, the ‘ruling class’ might be substituted with ‘patriarchy.’ However, this cannot be a straightforward ‘swap,’ as *patriarchy* implies a singular structure (Beasley, 2012). Moreover, class, ethnicity, and sexuality intersect with gender in Connell’s theorising (Connell, 2010; Connell & Messerschmidt, 2005), to account for the subordination of some masculinities by others.

The structural notion on which hegemony is based - that power can be ‘held’ and exercised - has raised questions over its compatibility with poststructuralist theorising. Beasley (2012), for example, accuses the theory of ‘weak modernism’ in its plurality of structures (e.g., multiple masculinities), writing that “subjects in postmodern theorizing are not – as Connell conceives them – (externally) constrained by structures, but rather they are (made up of) discourses” (Beasley, 2012, pp. 756–757). More on this epistemological impasse is included in the methodology chapter, below. However, there are parallels between aspects of the theory and Foucault’s notion that power often induces pleasure (Hook, 2007). Hegemonic masculinity is perpetuated by *complicity* and the *patriarchal dividend* this produces. Complicit women can also receive a ‘dividend’ through what Schippers (2007) termed hegemonic femininity.

Hegemonic masculinity might be considered a set of dominant discourses that the subject draws on, rather than externally constraining him. But, as it is largely unfixed, it is difficult to say what hegemonic masculinity 'is.' This has led to its reification as a singular set of static, 'toxic,' character traits that one might embody (i.e. a role). Connell (e.g., Connell & Messerschmidt, 2005) has argued against such reification. Nevertheless, Connell and Messerschmidt (2005) supply a definition of sorts, arguing that hegemonic masculinity retains its status amongst multiple masculinities as "more socially central, or more associated with authority and social power, than other [masculinities]" and it "presumes the subordination of other masculinities" (p. 846). It is not (necessarily) a set of negative character traits (e.g. Beasley, 2013; Moller, 2007; Whitehead, 2002) or "a fixed character type" and there are many positive aspects of hegemonic masculinity that have enabled its perpetuation, such as "bringing home a wage, sustaining a sexual relationship, and being a father" (Connell & Messerschmidt, 2005, p. 840).

### **Inclusive, or hybrid masculinity?**

Despite difficulty in defining hegemonic masculinity, some have argued that heterosexuality and ableism have been relatively consistent markers of hegemony (e.g. Robertson, 2006). It has also been noted that gender is not static – either in a temporal or spatial sense. As such, it should not be assumed that heterosexuality or ableism exclusively define masculinity; moreover, to the extent they might currently be considered strong components of hegemonic masculinity, this should not be presumed to be the case indefinitely. Indeed, Anderson (2007) has argued, under what he has termed *Inclusive Masculinity*, that heterosexuality can no longer be considered a solid basis upon which hegemonic masculinity might be premised. Rather, he has asserted that inclusivity with regards to sexuality now comprises the most socially accepted form of masculinity and, as such, has become 'hegemonic' itself.

This enticing notion has, however, been seriously questioned. Some of this questioning is premised on the basis that Anderson's sample is comprised mainly of white, educated, privileged young men (Lyons & Gough, 2017). Such men may be considered to occupy positions of relative power within society and thus have more 'room' to manoeuvre between different forms of masculinity; or be allowed more freedom to appropriate other masculinities and cultures than men (i.e. non-white; non-heterosexual) with less cultural capital (Bridges & Pascoe, 2014).

Furthermore, the questions it raises are of vital importance to questions of how gendered power is maintained. As O'Neill (2014) argues, an examination of post-feminist sensibilities offers a useful way to think about the context for inclusive masculinity's inception. In addition to providing a sense of "cheery optimism" (p. 107). O'Neill considers inclusive masculinity within a larger post-feminist incentive to "take feminism into account" (McRobbie, 2004, p. 255) by erasing consideration of sexual politics while simultaneously undermining the gains feminists and feminism have made. Bridges and Pascoe (2014) extend this thread through consideration of hybrid masculinity. They draw on Demetriou's (2001) concept of 'dialectical pragmatism' which, they explain, argues that "what makes hegemonic masculinities so powerful is precisely their ability to adapt" (Bridges & Pascoe, 2014, p. 249). They go on to identify more specifically the ways in which this happens, through *discursive distancing* in which men may distance themselves from non-hegemonic masculinities even as they perform aspects of these; *strategic borrowing*, in which elements of non-hegemonic masculinities are selectively borrowed; and *fortifying boundaries*, in which practises which appear to challenge hegemonic masculinity, serve to shore-up the boundaries around it (e.g. gay vs straight or man vs woman).

As mentioned, hegemonic masculinity has also been considered to be characterised by physical ability and athleticism (Robertson, 2006). Indeed, as Shakespeare (1999) points out, those who are disabled have sometimes been considered as a 'third gender'. It may be partly for this reason that, as Lindemann and Cherney (2008) identify, wheelchair athletes themselves "maintain ableist and masculinist ideals that often contrast with the ideological stance of disability rights activists in the U.S." (p. 121) by adopting 'hypermasculine' attitudes that reinforce notions of masculinity as aggressive, violent, and physically proficient. Indeed, the authors argue that it is this ability to adopt "masculine ideals" (which may also be considered hegemonic) that provides the men with a sense of "self-esteem and empowerment" (p. 121). If considered under a framework of 'hybrid masculinities', hegemonic masculinity may be seen as hybridising disability through processes of discursive distancing and fortifying boundaries. As they conclude, "the sport of wheelchair rugby does not smash stereotypes as much as communicate the message that such ableist constructs do not apply to its players" (p. 121). What they consider hegemonic masculine qualities remain essentially unchallenged.

However, as Shakespeare (1999) argues, there may be much that able bodied men might learn from disabled men in relation to sexuality. Shakespeare discusses the ways in which men whose erectile functioning has been disrupted by disability have learned to practice sex in ways that are less narrowly defined than dominant (heterosexual) expectations of sex as invariably

consisting of penetration of a vagina by a penis. This important point has some overlap with studies exploring the ways otherwise able-bodied men have renegotiated sexual practices following prostatectomy induced erectile dysfunction (e.g. Oliffe, 2005). To the extent that age might decrease erectile functioning, the same point may be applicable to older men.

### **Hegemonic femininity and the heterosexual matrix**

Connell and Messerschmidt (2005) identified that, in order to understand how hegemonic masculinity operates as a process, one also needs to consider femininities. They elaborated that there had, at the time of writing that paper, been a relative lack of emphasis on the role of femininities in extant literature. Schippers (2007) took up this task of considering how hegemonic masculinity might work, in relation to femininity, to perpetuate the continued domination of men over women. As Schippers elaborates, the nature of gender relations is a symbolic one. As a starting point, Schippers acknowledges the understanding of Connell and other gender theorists, that “masculinity is always defined through its difference from femininity” (p. 90). She extends this understanding of difference through Butler’s concept of the heterosexual matrix, which is interpreted as defining gender relations in terms of heterosexual desire for the ‘other’. In this sense, masculinity and femininity need to be understood as related to each other through “an erotic attachment to difference” (p. 90). This relationship is based on assumptions (as discussed earlier in considering the ways in which sex is conflated with gender in Butler’s theorising) that attraction for members of the opposite sex is ‘natural’. In this way, Schippers argues, violations of this ‘natural’ order are constructed as deviant or subversive and are therefore shunned. This argument, Schippers continues, helps account for why homosexuality is often subordinated within society; moreover, it accounts for ‘internal’ hegemonies within masculinity that prejudice ‘effeminate’ gay men even within gay communities – their association with femininity violates the ‘natural’ order which precludes men from engaging in behaviours or practices seen as feminine.

Schippers is at pains to separate the symbolic aspects of this relationship to actual domination by men over women, or by men over men, and women over women (but never women over men). These symbolic aspects provide the justification, or rationale for practice. As Schippers states, “masculinity and femininity are hegemonic precisely in the ideological work they do legitimate and organise what men actually do to dominate women individually or as a group” (93). Women who violate gendered expectations within this hegemonic system of relations are considered ‘pariah’ femininities for violating this order and engaging in behaviours that are ‘masculine’. The pariah status, Schippers argues, can be seen in labels such



as ‘bitch’ for women who engage in ‘masculine’ aggression, or ‘sluts’ for having a voracious sexual appetite – as this is culturally constructed as the domain of men. *Hegemonic femininity* is defined as practises of femininity that most effectively justify the continued hierarchical domination of men over women. This additional consideration also accounts for the *complicity* observed by some women within gender hegemony; accordingly, those who come closest to hegemonic femininity also receive a *patriarchal dividend*.

Based on this framework, Schippers redefines Connell and Messerschmidt’s (2005) definition of hegemonic masculinity to account for the ways in which internal gender hegemony works (the subordination of some masculinities by others) as well as external hegemony (the subordination of some femininities by others). It is worth quoting in full. Schippers’ additions are in italics:

Hegemonic masculinity is the *qualities defined as manly that establish and legitimate a hierarchichal and complimentary relationship to femininity* and that, by doing so, guarantee the dominant position of men and the subordination of women.

Schippers goes on to define hegemonic femininity as follows:

*Hegemonic femininity consists of the characteristics defined as womanly that establish and legitimate a hierarchical and complementary relationship to hegemonic masculinity and that, by doing so, guarantee the dominant position of men and the subordination of women.* (p. 94).

According to Schipper’s revised framework, subordinate masculinities are those that embrace effeminate practices; but there are no ‘pariah’ masculinities, as this would ‘contaminate’ the concept of masculinity, which must always hold a superior position in the hierarchy.

Femininity, as a category, however, can accommodate the practises of some men by virtue of the fact that it is already in an ‘inferior’ position relative to masculinity.

As seen above, hegemonic masculinity is a flexible theory which considers the ways in which gendered power dynamics may be perpetuated. Through the process of hybridisation, it is able to subsume ostensible challenges through incorporating these – without upsetting the (heteronormative) assumptions on which it is arguably premised. It may provide a useful framework for analysing systems of gendered power in older age. Research with men aged 85 and over (Al  x et al., 2008) identified a strong tendency for Swedish men to neglect the

contributions of others (including wives) when discussing their success; and attempts to ‘maintain the male facade’ in the face of loss of physical capacity. Moreover, men’s groups, which were often joined for companionship, provided forums for “negative attitudes towards modern values such as gender equality, homosexuality and contemporary religiosity” (p. 455). Contradictorily, these men also ‘embraced a less ‘traditional’ form of masculinity (‘being related’) which valued domesticity, interpersonal relationships, acceptance, and reflection.

Contradictions in how men express masculinity reveal the inadequacy of simplistic conceptualisations of masculinity in older age and suggest that context largely determines masculinity’s expression. As Wetherell and Edley (2014) argue, “individual speakers can shift between different modes of masculinity—at one time subordinate, then complicit, then hegemonic too” (Wetherell & Edley, 2014, p. 357). These researchers also noted that physical and health challenges necessitate renegotiations of masculinity in older age. Indeed, traditional gendered conceptions of health and the body might make it easier for women to transition into older age, given they are already – by virtue of femininity – considered as having ‘unstable bodies’ through ongoing reproductive processes and the fact that illness is generally aligned with the feminine realm (Shildrick, 1997). Conversely, men might struggle with renegotiations of masculinity as they age, given that masculinity is traditionally constructed as everything that femininity is not (Lorber, 1996).

Marchant (2013) investigated the strategies of older Australian tradesmen to remain in the workforce, identifying hegemonic masculinity as including “physical strength and endurance, independence, control, being the breadwinner, striving at work and exercising skills-based activity” (p. 846); thus, they resisted the transition to retirement through taking care of physical health, hiring more labour, and readjusting their work practises through such means as scheduling. Here we see intersection based on similarities between active aging, or continuity, and hegemonic masculinity, which, as the authors argue, includes fitness, work, and earning an income.

### **Precarious Manhood**

Precarious manhood (Vandello et al., 2008; Vandello & Bosson, 2013) contends that masculine status is unstable and needs to be defended regularly through practices deemed masculine, such as the rites of passage identified amongst diverse societies (Vandello et al., 2008). In the West, dangerous driving, risky sports, and excessive alcohol and drug consumption serve as ‘public demonstrations of proof’ of masculinity. These reflect underlying hegemonic masculine values of agency, action, the need to prove masculinity, and masculinity

as avoidance of femininity; these have remained relatively stable, although “specific manifestations shift with time” (Vandello & Bosson, 2013). Precarious manhood is supported by the ‘overcompensation thesis’ (Willer et al., 2013), derived from observations that, after engaging in ‘masculinity-reducing’ behaviours, men overcompensate with overt displays of masculinity .

Precarious manhood is an enticing theory. However, Addis & Schwab (2013) argue that it risks reinforcing a binary system of gender relations that implicitly constructs femininity as *not*-precarious; and ignores numerous examples of the ways women must also continuously affirm their gendered status. It is more accurate to consider gender itself as precarious, socially constructed, performed, unstable, and fluid. Thus, precarious manhood offers little more than gender as performance or hegemonic masculinity. Hegemonic masculinity, too, is striven for but never fully attained; one might also feel compelled to ‘defend’ one’s claim to hegemonic masculinity against threats through performative displays.

### **Masculine Capital**

The idea that symbolic capital (cultural and social) exists in addition to economic capital was conceptualised by Bourdieu (2011). However, he omitted gender from his notion of cultural capital, despite the gendering process being one that creates power imbalances (Laberge, 2016; McCall, 1992). Accordingly, Laberge (2016) and McCall (1992) insisted on attributing gender the same importance as class in Bourdieu’s theorising. As an extension of this idea, masculine capital, or ‘credit’, (De Visser et al., 2009; e.g., de Visser & McDonnell, 2013) may be accrued through activities deemed masculine (perhaps hegemonic). This capital may then be ‘traded’ for activities deemed less masculine. So, for instance, homosexual men may ‘insure’ themselves against being judged as less masculine through demonstrations of socially sanctioned masculine expertise or practice.

Although most research into masculine capital has been with younger men, one might speculate that men ‘trade’ masculine capital as they age. Non-physical masculine practices might hypothetically take greater prominence in men’s lives. For instance, wealth or social status may ‘prove’ one’s control, agency, or power in the absence of the powerful physicality which formerly demonstrated this (Sixsmith & Boneham, 2002).

However, judgements regarding what can be legitimately ‘traded’ are subjective, and vary between contexts (De Visser et al., 2009). Sixsmith and Boneham (2002) found that adherence to hegemonic masculine values sometimes stymied access to social capital for older English men, particularly when men were reluctant to ‘trade’ masculine capital for social

capital. Thus, what counts as capital in one context (i.e. among other men) may be a liability in another (mixed gender social setting). Moreover, it is likely that older men compare themselves, not to younger men, but to those their own age. They may trade competencies that are relevant to their own social group, rather than to younger men. Membership in an older sub-group may be thought of as giving rise to a *habitus* (Bourdieu, 1977) different to that of younger men.

As can be seen, then, there are many theories that might help to make sense of the ways in which aging affects gender. Preference has been given in this chapter to theories that construe gender as contextually driven performance, rather than a static role that governs one's behaviour in relatively consistent ways across spatial and temporal contexts. Specifically, these include hegemonic masculinity, and processes of hybridisation which may also be considered a key way in which hegemonic masculinities retain their status as 'more socially central, or more associated with authority and social power' (Connell & Messerschmidt, 2005, p. 846). Indeed, as many have pointed out, if hegemonic masculinity was unable to subsume challenges, it would rapidly lose its relevance. It is also argued that other, key theories of masculinity, such as the notion of masculine capital, are not incompatible with hegemonic masculinity. For instance, according to this 'capital frame', one might consider that it is the fact that hegemonic masculinity bestows masculine capital upon those men who come closest to embodying its ideals. I remain unconvinced that precarious manhood offers any advantages over hegemonic masculinity, in that the latter also considers gender to be unstable; while hegemonic masculinity remains powerful, it is (paradoxically) 'insecure' and hence in need of constant reaffirmation (e.g., through media representations). The concepts of 'complicity' and the 'patriarchal dividend' also supply useful ways to think about the insecurity of hegemonic masculinity, as well as its attraction for men. Given the importance of context to gendered practice – including those practices that might be considered hegemonic - the ways in which masculinity might intersect with age is explored below, with a particular focus on embodiment.

### Chapter 3: Age, health, and embodiment:

This section examines how the constructs of aging and masculinity have been shown to intersect within the extant literature. It examines this intersection through a focus on issues of age, health, and embodiment. In exploring the notion of embodiment, brief discussion of some of the literature on mental health and loneliness in relation to aging is included. Although mental health might be considered a form of ‘disembodiment’, I argue that to call mental health concerns disembodied relies on a Cartesian split between mind and body. Indeed, mental health considerations invariably involve the body; one example includes the ways in which depression is often associated with physical inactivity (Bonnet et al., 2005) or perhaps problematic alcohol consumption (Coulson et al., 2014).

Moreover, a necessary corollary of ‘embodiment’ is disembodiment. A discussion of disembodiment is also included here to highlight how the two notions might be bound to masculinity. They are inseparable and provide meaning only in relation to each other. It will also be argued that men with greater financial privilege or access may have easier access to ‘disembodied’ notions of masculinity than those men who have relied on their body for their livelihood. To the extent that age begins to challenge physical capacity, the ability to shift to ‘disembodied’ ways of participating in hegemonic masculinity may assume more relevance as men age.

#### Embodiment

Embodiment as a concept highlights the importance – and indeed the inseparability- of the body in considering gender. It encompasses the ways in which discourses govern and shape gendered performance, but also the role that physiological, or biological processes play in how bodies are used, felt, and made sense of. Thus, bodies are “both socially constructed and objective” (Turner, 1992, in Robertson, 2007, p. 67). Embodiment is an important consideration for aging masculinities because aging is a physiological process resulting in changes to the physical body; but it is also discursively governed, for example by discourses emphasising bodily health, appearance, and function. As already seen, discourses often govern aging through defining successful, or healthy aging.

Watson (2000) considered four main aspects of men’s embodiment, including the *pragmatic visceral*, *normative*, and *experiential* which relate (respectively) to the accomplishment of physical tasks; medical aspects; appearance related concerns; and feelings evoked by the body (Gough, 2018). As such, embodiment can encompass material as well as representational concerns (Robertson, 2006). Robertson (2006) recognises a paradox in how

men's relationships to their bodies have been theorised. On the one hand, men have been recognised as more associated (than women) with the mind than the body by writers such as Seidler (1994, in Robertson, 2006); on the other hand, the importance of bodily markers of strength have been considered aspects of hegemonic masculinity (e.g., Connell, 1995), Robertson suggests, using Watson's (2000) schema, that men's bodies might be considered both representational *and* material. Such a schema acknowledges that men's bodies are neither "biomedical entities [n]or discursive fabrications" (p. 450).

With regard to materiality, Robertson's (2007) 'everyday body' (p. 68) is equated with Watson's (2000) concept of the 'pragmatic body' (p. 118). Briefly stated, it refers to the ways in which men use their bodies to fulfil every-day, pragmatic duties – such as those related to fatherhood, work, or household tasks. As Robertson also notes, in accordance with Seidler (1989), these serve to objectify the male body as instrumental - that is, a means to a productive end.

However, this is not to deny that men also 'feel' their bodily experiences subjectively. Men also possess awareness of internal bodily processes; what Robertson considers 'invisible physicality' or 'experiential embodiment, and what Monaghan (2001) terms 'vibrant physicality' (in Robertson, 2007). This acknowledgement counters assertions that men have traditionally been less in touch with their 'felt' bodies than women. Importantly (for the current study), Robertson (2007) also recognises the 'changing body' as a prominent bodily experience for men. As he found, awareness of the changing body brought with it a responsibility to remain vigilant and take care of it. This is often balanced with a desire to pursue 'corporeal pleasure,' or practices which might be seen as physically detrimental.

## **Sexuality**

Sexuality provides an important example of the ways in which masculinity is embodied. It encompasses biological considerations but is also important for illustrating how embodiment is discursively governed. Given the symbolic power of penetrative sex, and the phallus (Butler, 1990; Connell, 1995; Sandberg, 2011; Schippers, 2007), 'staying hard' retains its importance as a marker of masculinity (Calasanti & King, 2005). And, men who cannot perform penetrative sex may feel emasculated (Sandberg, 2011). This need to 'stay hard' might also represent resistance to the narrative of decline that has steered much of the emasculating discourse on aging, sex and masculinity (Gott & Hinchliff, 2003; Marsiglio & Greer, 1994).

This ‘hard’ ideal of masculinity is exploited and perpetuated by commercial incentive. Pharmaceutical companies marketing erectile dysfunction drugs, for instance, emphasise the inability to perform penetrative sex as a sign of sexual dysfunction (Marshall & Katz, 2002). Potts et al. (2006) concur that Viagra has been beneficial in helping replace a discourse of decline with a ‘sex for life’ discourse. However, they also argue that the emphasis on penetrative sex is limiting; it prioritises biological mechanisms and negates the ways in which sex may be about more than just penetration. There was pressure for their middle-aged and older male participants to ‘stay hard’ after prostatectomies; but some were able to reject this discourse and broaden their sexual practices, reporting less ‘selfishness,’ and more focus on their sexual partners’ needs. Jackson (2016) noted that such ‘shocks’ open up new possibilities for how men might define their own masculinity.

### **Disembodiment**

The male body has traditionally been seen as instrumental, as an objective entity separated from subjective reality as a result of the Cartesian split (Robertson, 2007). Thus, men have been considered less in touch with their bodies than women. However, this is highly contestable. Indeed, physical decline for older men can cause distress for impairing the instrumental function of the body, but this is inseparable from subjective *feelings* of physical decline and distress – particularly those for whom feeling strong and healthy was always a point of masculine pride (Jackson, 2016).

Nevertheless, some men may be able to renegotiate power in other, ‘disembodied’ ways. Wealth, for example, is recirculated in popular discourses as an integral component of ‘successful aging’ in addition to physical virility (Calasanti & King, 2005; Clarke et al., 2014). As Twigg (2004) summarises, “Male power ... resides in money, status, social dominance, so that early signs of aging such as gray hair are read as marks of maturity and authority” (p. 62). The ability for men to be able to define their aging status in these ways might be considered a ‘patriarchal dividend’ (Connell, 1995). Alternatively, those who lack money or social authority may be doubly disadvantaged when confronted with bodily challenges (Calasanti & King, 2005; Calasanti & Slevin, 2001; King & Calasanti, 2013; Ranzijn, 2010).

A dominant ‘breadwinner’ discourse has helped shape expectations for men related to issues of both wealth and competence (Cecil et al., 2010; Howson, 2008; D. Jackson, 2016). Cecil et al., (2010) found that men whose role as the family breadwinner was challenged by cancer keenly felt the loss of financial provision as a marker of masculinity. Retirement presents a similar challenge - work and ambition can no longer be deployed as markers of one’s

breadwinner status (Emslie et al., 2004) so alternative markers might be sought. In a case study of an older, wealthy man, Canham (2009) noted that he was sheltered from the loss of physicality by his privileged financial status, and used this status to emphasise the predominantly non-physical elements he still had control over (donating to political parties for instance). With regard to fatherhood, some older fathers have constructed their parenting capacities in terms of “economic provision” through career status and “financial and occupational stability” (Shirani, 2013, p. 1116) rather than the ‘active father’ discourse espoused by younger fathers.

However, while some men seek to maintain ‘traditional’ masculine notions of dominance, control, and power as they grow older, other men may ‘soften’ in their adherence to these and embrace greater egalitarianism. This may be particularly true for ‘upwardly mobile’ men who have achieved their class status due to the additional contribution of their wives’ labour to the household income (Emslie et al., 2006). In contrast, very wealthy men have little need to renegotiate their masculinity (being able to exert power through non-physical displays of wealth and prestige) while working class men have little capacity to (having no recourse to financial privilege as a marker of masculinity). Below, some other prominent discourses related to the aging male body are discussed.

### **Aging discourse**

Contradictory discourses and expectations regarding older age can cause conflict for older men: they are required to remain fit to meet the standards promulgated by active aging discourse; yet their bodies are also expected to fail these standards within biomedical or ‘failed masculinity’ discourses emphasising the inevitability of decline (Jackson, 2016).

Media provide visible examples of the significant contradictions facing older men (Rozanova, 2010; Thompson Jr, 2006). On one hand, active, successful, or anti-aging discourses have a strong presence in media aimed at the burgeoning older adult audience, or the ‘grey dollar’ (Hamad, 2014). On the other hand, films tend to promulgate “renewal and rejuvenation” (Hamad, 2014, p. 81), although it might be argued that there are more of these films that have roles for male rather than female actors.

The film industry produces films that portray older age as a time of “decline, decay, death, and loss” (Hamad, 2014, p. 79). Almost paradoxically, this biomedically infused construction of aging-as-sickness in post-industrial society exists even as increases in the standard of living, cosmetic surgery, and various other consumer health-care practices have



served to improve health and modify the appearance of aging (Jones & Higgs, 2010; Silver, 2003).

The paradox might be rendered sensible through consideration of the complementarity of the two discourses, which operate jointly (Katz, 2000) to market health products and services to the ever-increasing ‘grey dollar.’ Advertising by the anti-aging industry inflames and exploits masculine fears of decline (Jackson, 2016) by constructing aging as a ‘sickness’ resulting from a loss of testosterone (Calasanti & King, 2007). ‘Fixes’ are provided through the ‘pharmaceuticalisation of male aging’ (e.g., Viagra and testosterone replacement supplements, Watkins, 2012), which promise to restore sexual potency, power, and various forms of competitive advantage ostensibly enjoyed by younger men (Calasanti & King, 2007; Gross & Blundo, 2005; Marshall & Katz, 2002).

Despite the emphasis within popular media on men’s health and physical vitality (Crawshaw, 2007; Gough, 2006, 2013), gains in health and well-being may be offset through discourses of masculinity that are inimical to the expression of vulnerability (Johnson et al., 2012). These might help explain links between masculinity and a range of problematic health-related behaviours (Courtenay, 2000a; Evans et al., 2011; O’Brien, Hunt, & Hart, 2005; Springer & Mouzon, 2011). Such healthcare practices have traditionally been seen as feminine (Ojala et al., 2016) and it is against femininity that masculinity is frequently dichotomously defined (Schippers, 2007).

Although the life expectancy gap has closed to just 3 year’s difference between men and women in A/NZ (Statistics NZ, 2012), men have tended to avoid seeking help for health complaints (Foucault, 1972; Mansfield et al., 2003; O’Brien et al., 2005; J. A. Smith et al., 2006). Courtenay (2000) attributed this to hegemonic masculine qualities such as the “denial of weakness or vulnerability, emotional and physical control, the appearance of being strong and robust, [and] dismissal of any need for help” (Courtenay 2000, p. 1389).

Hegemonic masculinity has also been implicated in copious alcohol consumption (eg., Campbell, 2000; Peralta et al., 2010; Thurnell-Read, 2011), poor diet (eg., Gough, 2007) and risk taking behaviours (Courtenay, 2000; Meier-Pesti & Penz, 2008). It has also been suggested that Western men are also less effective than women in their coping strategies, and are less likely to seek social support when problems arise (Evans et al., 2011; Meadows & Davidson, 2006; Springer & Mouzon, 2011; Tannenbaum & Frank, 2011).

Most of the above associations have been established in relation to more youthful masculinities. Some older men may assert their masculinity by appealing to younger masculine notions, thus suggesting a pressure to remain youthful. This was observed with some older men

defining themselves as bachelors rather than widowers (Van den Hoonaard, 2007). Nevertheless, it would be inaccurate to consider younger ideals of masculinity as applying in all cases; age and masculinity intersect in ways that are specific to older men (Evans et al., 2011; Griffith, 2012).

Moreover, while gender and age are socially constructed, it is important to consider both the physical decline that often accompanies older men (Fleming, 1999; Penninx et al., 2000; Twigg, 2004) and the importance of embodiment for men in defining and constructing their masculinity (Chapple & Ziebland, 2002; Jackson, 2016). Physical decline needs to be considered without over- simplifying men's experiences in later life or capitulating to a discourse of inevitable decline and decay. Some men, for instance, may even experience improved health in older age (Jackson, 2016).

Older men have been identified as pinioned between two contradictory health-related discourses – one values independence as a sign of masculinity; the other chastises them for not seeking help for health complaints (J. A. Smith et al., 2007). Noone and Stephens (2008) noted that older rural men negotiated a contradiction between “the virtuous regular health care user, and the masculine infrequent user of healthcare services” (p. 711) by adopting a position as more *legitimate* users of healthcare than women, whose use was for trivial reasons. Thus, masculine identities of invincibility seem to be important for some older men who use them “as a yardstick against which male vulnerability is viewed and negotiated”(McVittie & Willock, 2006, p. 798). Femininity acts as a ‘yardstick’ against which masculinity is opposed in binary form.

Bodily health, capacity, competence, functionality and agility appear to be more important than body image for older men (Jackson, 2016; Jankowski, Diedrichs, Williamson, Christopher, & Harcourt, 2016; Ojala et al., 2016). And the use of beauty products may be problematic for men through their association with femininity (Ojala et al., 2016). Nevertheless, the results are mixed (Gough et al., 2016), with some ideals related to appearance affecting the behaviours of younger and older men alike. These constitute another form of embodiment that relates looking good to feeling good (Robertson, 2007). Roy and Payette (2012) concluded that body image had physical and mental health ramifications for both older and younger men; Gough et al. (2016) suggested a ‘softening’ of masculinity based on the discovery that older obese men cared very much about their appearance, and did not justify this concern solely in terms of its relatedness to physical capacity, as other studies have found (Jackson, 2016; Jankowski et al., 2016; Ojala et al., 2016; Roy & Payette, 2012).

There are also suggestions that rejuvenation practices – once the domain of younger men – are increasing in frequency, and extending to middle-aged and older men (Holliday & Cairnie, 2007). As Twigg (2004) points out, cosmetic interventions are primarily concerned with the “denial of age,” (p. 61) influenced by a “consumer culture in which the body becomes a project to be worked upon, fashioned and controlled, a site of self-identity and reflexivity, as well as of consumption” (p. 61). Miner & Perelman (2013) suggested that older men increasingly seek plastic surgery or use steroids to look younger and compete in the workplace, but risk denigration for using products such as moisturisers and hair dye.

This denigration is likely to be more pronounced as men age. A discourse of *natural* aging has led to greater acceptance for 50-year-old men who engage in rejuvenation practices compared to 60-year-old men (Miner & Perelman, 2013). Jankowski et al., (2016) noted significant pressure for older men to grow old ‘gracefully’ (i.e. resist a changing appearance) while still ‘looking one’s age’.

The evident pressure to look after one’s body – whether to maintain appearance, bodily competence, or both - makes sense within an “anti-aging, market led culture that doesn’t listen to the limitations of age or decay” (Jackson, 2016, p. 47). Thus the cultural valorisation of youth over age (Becker, Diedrichs, Jankowski, & Werchan, 2013) may play a part in making men feel less masculine when age-related physical (or other) challenges arise (Bennett, 2007; Chapple & Ziebland, 2002; Evans et al., 2010).

### **Older Masculinity, Loneliness, and Depression**

As already prefaced, it is important to consider some ways in which ‘disembodied’ notions (i.e. mental states) are inseparable from concerns related to embodiment. As with physical health, masculinity has been explored in relation to mental health (Rosenfield & Mouzon, 2013). These relationships reveal the importance of gender to clinical practice by highlighting how the loss of markers of masculinity may result in psychological distress. Disparities between male and female suicide statistics suggest that masculinity may be an important predictor of suicide completion: in A/NZ, over twice as many men as women complete suicide in the age range 65- 79, with numbers evening out above this age (Statistics NZ, 2012).

Men are more likely to suffer from externalising disorders such as anger and aggression (Rosenfield & Mouzon, 2013) but major depression (an internalising disorder) may be masked in men by cultural expectations to stymie emotional expressiveness (Cochran, 2005) and diagnostic criteria that tend to more readily identify depression in women (Branney & White,

2008; Mellsop & Smith, 2007; Möller-Leimkühler et al., 2004). Michniewicz, Bosson, Lenés, & Chen (2016) suggest that 'gender atypical' mental health problems (i.e. depression; anxiety) pose a threat to men's gendered identities. Age may also influence negative attitudes towards depression. Older people, and 'male lay people' were found to have more negative views towards people with depression than the young (Connery & Davidson, 2006; Wetherell et al., 2009). However, this may be a cohort effect.

Certain qualities of hegemonic masculinity, such as the disinclination to disclose emotions (Cleary, 2012) may play a role in men's relatively high completion rates for suicide. Silver (2003) suggested that men's psychological vulnerability arises from fear of 'losing' one's masculinity, leaving them less likely to seek help. This argument resembles that made by proponents of the *precarious manhood* thesis (Vandello et al., 2008; Vandello & Bosson, 2013; Weaver et al., 2013). Older age might be a phase in which masculine status is harder to 'attain', as opportunities for asserting hegemonic masculinity become scarcer. Alternatively, the attainment of such masculinity may simply be less important as age ushers in a softer version of what it means to be an older man.

Mental health and well-being are also impacted significantly by loneliness, social isolation (Bekhet & Zauszniewski, 2012) and loss of a spouse (Oxman et al., 1992). These are key causes of distress for older people (Adams et al., 2011; Bano & Benbow, 2010), but there are suggestions loneliness is particularly pertinent for older men (Alpass & Neville, 2003; Buys et al., 2008; Gleibs et al., 2011; McLaren et al., 2015). Wenger & Jerrome (1999) found that men were not as adept as women at maintaining friendships over a twenty-year period. Moreover, men become a minority as they enter old age, because of their higher mortality rates, resulting in an ever decreasing pool of male friends (Gleibs et al., 2011). As Gleibs et. al. (2011) suggest, social programmes (e.g., 'gentleman's clubs') were particularly beneficial for older men because they have less experience than women with utilising social support, having previously relied on their wives or partners to organise social events. In A/NZ, the impact of loss of employment on social mobility and loneliness may significantly account for older men's depression (Alpass & Neville, 2003). Consequently, belonging to a social space has been identified as a determinant of well-being for older A/NZers (Wiles et al., 2009), but women in A/NZ and Australia have had better access to social support and larger social networks than men (C. Hall et al., 2007; Stephens et al., 2011).

While such research has compared the genders, most did not explicitly include masculinity as a construct. Such an approach could help reveal the specific ways masculinity might affect social mobility or 'belongingness' for older A/NZ men. For example, there are

suggestions that the impact of spousal death is felt more by men than women due to the aforementioned qualities that are used to construct masculinity (Bano & Benbow, 2010). Miller, Buys, and Roberto (2006) showed that for older rural Australian and American men, isolation coupled with reluctance to share emotions or confide, was seen to impede the formation of close friendships and thereby contribute to depressive symptoms.

However, social isolation is not invariably harmful. Davidson (2004) found that some older men who had never married had fewer friends but had habituated to this with autonomy and resilience. Many shunned large social networks. At least one participant in Jackson's (2016) qualitative study of older masculinities was content with solitariness and satisfied with his self-reliance. Thus, fewer friends or social isolation do not predict a lack of well-being for all older men, again reminding us that one cannot assume homogeneity within this broad demographic.

In line with not assuming homogeneity, it is important to consider how A/NZ masculinity might differ from that of other geographical and cultural contexts. Much of the research discussed in relation to embodiment, above, has been conducted with men from countries other than A/NZ. Yet, a cornerstone of hegemonic masculinity theory is the notion of *local*, *regional*, and *global* masculinities (Connell & Messerschmidt, 2005). Each of these levels may contain variations of hegemony different from the others. These have intersected (Christensen & Jensen, 2014) in complex ways to create a hybrid (Bridges & Pascoe, 2014; Connell, 2005) masculinity that is uniquely A/NZs. For this reason, the following section turns to an exploration of masculinity within A/NZ. It explores what, if any, differences might be found within the practices of A/NZ men that could relate to the ways in which masculinity and aging affect the body, mental health, and sexuality.

## Chapter Four: Masculinity in Aotearoa/ New Zealand

Phillips (1987) identified the beer drinking, rugby-playing, rural Pākehā pioneering man as a prominent stereotype until the 1970s and 80s – decades in which male baby boomers transitioned into adulthood. Such stereotypes reflect idiosyncratic aspects of national culture and are thus informative (Cuddy et al., 2015). However, A/NZ was equally afflicted by the social upheavals experienced in many parts of the world following WWII, and challenges to this stereotype arose as women entered the workforce in greater numbers, eroding gendered divisions of labour and men's almost exclusive claim as sole breadwinner of the household; urbanisation accelerated while A/NZ's pioneering, rural male image began losing its relevance; and the almost exclusive appeal rugby and racing held over the sporting interests of men began disintegrating. Male graduates and business executives featured more prominently in A/NZ society during the 80s and 90s and brought "a concern with physical appearance and bodily comfort that was closer to California than the dishevelled black-singleted Kiwi bloke of old" (p.275).

### The 'Southern Man'

The 'black-singleted kiwi bloke' - most visibly parodied in Murray Ball's *Footrot Flats* comics (1976- 1994), and comedian John Clarke's Fred Dagg character - aligns closely with the rugged, laconic, rural archetype of the 'Southern Man.' And, despite the growing challenges to traditional masculine norms and images, Phillips (1987) emphasised that these rural traditions held firm –in some regions more than others.

The 'number eight wire' mentality of creatively making do with whatever is at hand, a love of competitive sports (particularly rugby), a connection with the outdoors, and a 'laid back' attitude have helped form the stereotypical image of the A/NZ male (Rinne & Fairweather, 2011); it is also encapsulated in the 'man alone' archetype (Liepins, 2000). Although loosening, rugby retains a grip on A/NZ sporting affections (Olsen et al., 2015), and its attendant values of strength, stoicism, aggression, consistency, and reliability have traditionally influenced the identity of many A/NZ males (Ferguson, 2004). Such constructions have 'leaked' into other facets of A/NZ life, as in the hiring practices of school principals in A/NZ, which have tended to favour those men that exhibit these qualities (Cushman, 2008).

The 'kiwi bloke' is rightly considered mythical or stereotypical (Bannister, 2005), and is frequently derided or parodied as such (Campbell et al., 2006). Yet Žižek (in Vighi & Feldner, 2007) has argued that ironic parodies of ideologies often work to perpetuate that which they are ostensibly criticising. Studies of rural A/NZ masculine sub-cultures and communities have

exposed what might be considered traditional or stereotypical performances of masculinity. Campbell (2000) explored the masculine drinking culture of a rural A/NZ pub (tavern) and discovered a culture of competition, in which successful performance of masculinity was predicated on drinking excessively while also maintaining control and the ability to engage in ‘conversational cockfighting’ - or repartee. Others have located the rugged A/NZ man - the kiwi bloke- in predominantly rural settings (Bannister, 2005). The media acts as a conduit for such dominant discourses by reflecting and reconstituting them (Lyons, 2000). Within A/NZs media, the image of the high country ‘southern man’ is one of the more visible constructions, and was particularly evident through its use in the A/NZ Speight’s beer advertising campaign initiated almost two decades ago (Gee & Jackson, 2012; Law, 1997). It is interesting to note, however, how the most recent (2018) Speight’s advertisement reflects a less regionally infused, more vulnerable and sensitive portrayal of ‘mateship’ and masculinity (Venuto, 2018).

In the ironic lyrics of the Speight’s song, Gee and Jackson (2009) found Southern parochialism promulgated through contrast with an Auckland (northern) masculinity obsessively focussed on appearance and “pretentiousness” (p. 188). Brady (2012) also identified an ideological fissure between the ‘yuppie’ culture of Auckland and the “nostalgically imagined rural South Island” in the Speights ‘perfect girl’ television advertisements of the 1990s, in which Auckland’s urbanity was conflated with femininity. Brady argued that this division was “readily recognizable to a New Zealand audience” (p. 359). The “repudiation” of this lifestyle and its associated femininity legitimised the performance of a homo-social masculinity which was, paradoxically, also dependent on “legitimation through heterosexuality” (Brady, 2012, pp. 357–358).

The ‘Southern Man’s’ attendant values are not confined to the ironic, self-aware manipulations of the advertising industry; they have been identified in the talk of young research participants (McNeill & Douglas, 2011). And, the North/South divide was articulated in the opinion of ‘a Dunedin-based cosmetics buyer’ who considered that the practice of wearing eye-liner (like All Black Maa Nonu) might be “more popular ... up North” (Oldham, 2004, in Tagg, 2008, p. 416).

‘Southern’ masculinity is shaped by the same discourses identified by Liepins (2000) as produced within the A/NZ agricultural sector. Toughness, strength, tenacity and decisiveness were qualities that defined the rural agricultural farmer through an association with physical labour; and discourses of aggression, battle and power were used to construct the farm leader within a more political, business-oriented domain. A similar urban/rural divide has also been identified in Australia (Pini, 2005). While A/NZs primary economic activity revolves

around the agricultural sector these discourses seem likely to persist. The divisions articulated (North vs South) might be considered divisions between two regional (Connell & Messerschmidt, 2005) discourses of hegemonic masculinity.

### **The ‘Metrosexual’**

As an echo of pioneering masculine values (Phillips, 1987), the ‘southern man’ stereotype is doggedly persistent. But the ‘metrosexual’, which had its inception in the early 2000s, provides a powerful, alternative set of masculine images, norms, and discourses. It encapsulates many of the ‘feminine’ qualities against which the southern man is dichotomously defined. It has historical precedent prior to the 20<sup>th</sup> century in the Victorian ‘Dandy’ (Kaye, 2009), and the ‘playboy’ (Osgerby, 2003). Although the metrosexual has arguably been replaced by the more recent ‘hipster’ stereotype, its relevance resides in representing a stylish version of masculinity concerned with appearance and artifice.

‘Metrosexuality’ grew during the 1970s and 80s with the burgeoning class of educated college graduates and businessmen, and increasing urbanisation (Phillips, 1987). The ‘softening’ or ‘feminisation’ of masculine ideals was also hastened by de-regulation and the outsourcing of the manufacturing industry (Bannister, 2005). As such, it is inseparably bound to the growth of consumer society and neo-liberalism during these decades (Sender, 2006); and in A/NZ it might be more often associated with the business and political centres of Auckland or Wellington, as prefaced above with the divisions articulated between a ‘northern masculinity’ reflected in Maa Nonu’s use of eyeliner, and a southern masculinity that might eschew make-up as a visible sign of feminine vanity.

The development of the metrosexual ran in opposition to the dominant breadwinner model of masculinity, or else the more rugged masculine image of the sagging physique (Hall & Gough, 2011). The media has played a key role in circulating metrosexual ideals, including through television and men’s lifestyle magazines, which overwhelmingly present men with a clean, toned, muscular appearance (Hall & Gough, 2011; Ricciardelli et al., 2010). Observations of changes in drinking practices by young A/NZ professionals (Willott & Lyons, 2012), increased acceptance of male grooming, and other erosions of ‘traditional’ masculine practice (McNeill & Douglas, 2011) are tied to the consideration of the ‘metrosexual.’ Kaye (2009) argued that the television show *Queer Eye for the Straight Guy*, which originally screened in A/NZ from 2003-2007 (returning in 2018 for another season) normalised and legitimised the heterosexual male’s concern with appearance and style.



Some have argued that *Queer Eye for the Straight Guy* (and metrosexuality more generally), helped foster acceptance of gay masculinity (e.g. Clarkson, 2005; Sender, 2006). For Ervin (2011), the metrosexual embrace of homosexuality upset hegemonic masculinity's inherent heterosexuality by becoming hegemonic itself. More generally, Anderson's (2007) notion of *inclusive masculinity* provided a case for the disintegration of heterosexuality as a boundary of privilege within hegemonic masculinity.

Countering these optimistic proclamations is the notion of *hybrid masculinities*. These incorporate marginalized or subordinated masculinities (such as homosexuality), while working to obscure entrenched inequalities and systems of power (Bridges & Pascoe, 2014; Munsch & Gruys, 2018; O'Neill, 2014). In support of this, (Kaye, 2009) stressed that metrosexuality is exclusively heterosexual; gay men are "by definition" disallowed from being metrosexual (p.122). Harding (2007) found constructions of nurses as gay, despite what appeared to be increasing societal acceptance of male participation in traditionally feminine roles. Similarly, Tagg (2008) found that some male netballers were labelled as homosexual for participating in a sport traditionally associated with femininity. Such studies might suggest that hegemonic masculinity remains largely heterosexual within A/NZ.

Indeed, it has been asserted that traditional feminine appearance concerns are reconciled with entrenched notions of masculinity through the relatively limited number of products A/NZ men permit themselves to possess, and "claims of functionality rather than appearance concerns"(McNeill & Douglas, 2011, p. 452). Although young, McNeill and Douglas's participant responses suggest that society's attitudes regarding what is 'acceptable' for men in general are always changing. Given, as Riley (1987) pointed out, that changes in culture and society intersect with age across the lifespan, one might also reasonably expect ongoing renegotiations of masculinity amongst men over 65. Indeed, as discussed above, there are suggestions that older men are also concerned about appearance and grooming (Brendan Gough, 2006; Jankowski et al., 2016; Miner & Perelman, 2013) and are increasingly embracing technologies and products to modify their image and appearance. Pompper (2010) showed that "the metrosexual has not escaped older men's notice;" one older participant expressed that "the concept of being pretty is more accepted amongst [his] peers" (p. 690).

The metrosexual 'space' opened up a version of heterosexual masculinity compatible with neo-liberalism's "inflation and reification of the notion of 'difference'"(Braidotti, 2005, p. 169); its consumption patterns, and its "requirement to reshape the male labor force" (Sender, 2006, p. 146) through an emphasis on personal responsibility. Metrosexuality made it 'safe' for heterosexual men "to partake in the carnival of consumption" through legitimising

appearance concerns, and by turning male bodies into “objects of display subject to the male gaze” (Patterson & Elliott, 2002, p. 241).

Thus, the forces of consumerism and neo-liberalism have influenced the development of both metrosexuality and general understandings of the ‘third age’. A concern with appearance, fitness, the valuing of leisure, the freedom that money can buy, and the importance of individuality are common to each. Each provides a set of norms, ideals and discourses to challenge the traditional discourse of decline once associated with growing older – yet they also provide ideals and norms that may be difficult for the older man to embody. In summary, the dichotomy of the *Northern/ Southern Man*, the *yuppie/real-man*, or *metrosexual/ hard-man* stereotypes within A/NZ might be considered different masculine discourses vying for hegemony, yet they are in fact similar in their othering of femininity and homosexuality – despite surface appearances - and their dogged adherence to heterosexuality.

### **‘Non -hegemonic’ Masculinities.**

The points related to metrosexuality and ‘inclusive masculinity’ above are intended to highlight the ways in which hegemonic masculinity is able to encompass various non-hegemonic masculinities while maintaining hegemony – and thus appear ‘inclusive’ This has been discussed in relation to the ways in which homosexuality remains ‘othered’ while apparently legitimated. Although none of the participants in this research identified as homosexual, it is nevertheless important to acknowledge ‘nonhegemonic’ forms of masculinity so as to not partake in the process of othering by assuming one particular (heterosexual) form as exclusively valid.

This applies equally to consideration of different ethnicities within A/NZ. None of the participants identified themselves as other than Caucasian, but it is important to consider the role that ethnicity plays in masculinity. As argued above, Pākehā masculinity has been considered the norm in A/NZ against which different ethnicities have been othered. This is not dissimilar to what has been observed at a global level, where Black American, Asian, African, and other non-white ethnicities are situated outside the norm as non-hegemonic forms of masculinity (Connell & Messerschmidt, 2005; Laing, 2017).

In A/NZ, Māori and Pasifika masculinities provide examples of ‘local’ or ‘regional’ masculinities that are strongly tied to A/NZ, yet do not fit within a Western/ Caucasian cultural grouping. Traditionally, Māori culture has valued oratory, wisdom and compassion as qualities to be embodied by men (Hokowhitu 2003, 2004, in Rodriguez et al., 2015). Nevertheless, as

Hokowhitu (2003, 2004) and Rodriguez (2015) point out, in post-colonial times Māori and Pasifika masculinity has come to be defined in terms of hypermasculine, predominantly physical qualities related to the ‘warrior’. These ‘local’ masculinities have been influenced by wider global trends related to the migration of Pasifika people away from traditional socio-cultural structures.

Nevertheless, within Samoan culture, for example, the *fa’afafine* transgresses the gender binary as a liminal performance of gender that eschews and subverts the masculine image of the warrior, to instead embrace qualities more generally considered feminine (Pearson, 2014). Within Māori culture, the term *takatāpui* refers to a man who identifies as homosexual, although it is important to note that, prior to the 1980s and 90s it did not exclusively refer to a homosexual man, but could also refer to a “close friend of the same sex” (Murray, 2003, p. 238). As Murray (2003) notes, it is favoured by some Māori men for its ability to communicate both ethnic identity and sexual orientation, suggesting that sexuality and ethnicity intersect in important ways. As with the homogenisation of masculinity into the dominant ‘warrior’ stereotype that has come to typically define Māori and Pasifika masculinity within A/NZ, colonisation has had an impact on Māori sexuality. As Aspin and Hutchings (2010) argue, Māori society was tolerant of diverse sexualities; but with colonisation and the religious conservatism this brought, sexuality came to be defined much more narrowly, such that homosexuality was seen as deviant. The reclamation of identities such as *takatāpui* might thus be seen as a resistance to this that has emerged with a renaissance in Māori language and culture in recent decades (Murray, 2003).

The extent to which the masculine discourses outlined above contribute to older men’s understandings of masculinity comprise the focus of the current research. Theoretical approaches to understanding both masculinity and aging have also been discussed in the introductory chapters. Although research into masculinity and aging has burgeoned within recent decades, questions remain. These are largely related to masculinity and aging within a A/NZ context. Thus, the following research questions guided the current study: How do older men construct the ideals, norms, and discourses of masculinity in A/NZ? Where and when can such ideals, discourses, norms be traced to? What possible relationship might constructions of masculinity in older men have to subjectivities, as constructed through talk? Might constructions of masculinity change developmentally, in response to old age? How do men negotiate or reconstruct any potential changes in the construction of masculinity? What theory or theories of masculinity best account(s) for men’s lived experience? And, to what extent are

older masculinities in A/NZ impacted by issues related to embodiment, including physical decline and physical ailment.

In approaching these questions, theories influenced by social-constructionism are favoured for their ability to interrogate power relations related to aging and masculinity (i.e., gender as performance, hegemonic masculinity, critical approaches to gerontology). But the current research also takes an open, exploratory approach to considering which theoretical approaches might provide the best explanatory power. Some of these may not fit squarely within a social-constructionist epistemology. The methods for considering these questions are outlined in the following chapter.

## Chapter five: Methodology

This chapter outlines what is understood by the term ‘social constructionism’ as used in this research and explores the limits and possibilities that arise from such an approach. An attempt will be made to reconcile social-constructionism with the ‘epistemic relativism’ (as opposed to ‘judgemental relativism’) found in the critical-realist theorising of Bhaskar (1986). The possibility of reconciliation is noted by previous researchers (e.g. Al-Amoudi & Willmott, 2011; Cruickshank, 2012). Cruickshank (2012) discusses a “mode of engagement based on the view that there are complementarities” between them; namely, in the recognition that “intersubjective meanings are an important part of social reality” (p. 77). The desire to reconcile these positions stems from recognising that a purely relativistic stance is ultimately self-defeating in its reduction of all truths to equivalence; in its ultimate inability to discriminate between the respective values of different understandings; and, hence, in its shortcomings as platform upon which to make moral judgements. Nevertheless, the term social constructionism is retained and favoured in this research to remain focussed on the profound extent to which aging and masculinity are constructed through social influences, and to consider that any inferences made from the men’s talk are intersubjective.

As Crotty (1998), outlines, social-constructionism assumes that phenomena are constructed; that is, they do not exist ‘external’ to one’s experiences of them but are constructed in interaction. It further assumes that we construct meaning according to the social and cultural contexts in which we are embedded, and which precede us. In setting out what social constructionism means for the study of psychology, Gergen (1985) argued that the “terms in which the world is understood are social artifacts, products of historically situated interchanges between people” (p. 267). Moreover, as Gergen elaborates, social constructionism challenges previously taken for granted assumptions of positivism: namely, that observation can confirm understandings or predetermined categories, contingent as observation is on language conventions that predetermine what can be observed. Rather, the “deployment of the term *truth*” may be seen as a “means for warranting one’s own position and discrediting contenders for intelligibility” (p.268). ‘Truth’ may be deployed for political purposes, as a mechanism of social control. Indeed, psychology has played an integral part in this (Rose, 2009). In response, social constructionism is concerned with revealing, challenging, and ultimately deconstructing systems of power and social control (Burr, 1995; Cruickshank, 2012).

There is a tension, then, between social constructionism and many of the positivist theories discussed earlier which overwhelmingly engage hypothetico-deductive methods to

uncover truths about aging. However, the scientific method, which relies heavily on this method, can be considered as perhaps the most dominant ‘regime of truth’ within western societies; according to Foucault, regimes of truth can be understood as:

(1) “the types of discourse [society] harbours and causes to function as true”; (2) “the mechanisms and instances which enable one to distinguish true from false statements” and (3) “the way in which each is sanctioned”; (4) “the techniques and procedures which are valorised for obtaining truth”; (5) “the status of those who are charged with saying what counts as true” (Foucault, 1977, pp. 12–14)

Formal theories of aging (e.g., disengagement theory, activity theory) assume that empirical observations will confirm them to be true - or else disconfirm them. However, these theories, and the hypothetico-deductive research they spawn, simultaneously shape and limit understandings of what successful aging is. In other words, rather than being purely objective, empirical research on such theories arises from dominant understandings of how people *should* age. And, in finding evidence for such understandings, reinforces them by enshrining them as scientifically valid. Such research attempts to claim truth according to the most ‘valorised’ method of doing so within western societies; it seduces with the possibility that objective ‘truth’ can be known at all.

Some challenges to these theories have already been alluded to. It was suggested, for instance, that disengagement theory faded in significance as empirical evidence did not support it, and there were difficulties in defining what counts as ‘activity’ within activity theory. It was argued that these problems reflect the impossibility of understanding aging with a ‘one size fits all’ approach. Tellingly, empirical investigations based on these theories failed to unequivocally establish what ‘successful’ aging is – nor did (nor could) they fully account for the diverse experiences of older people. One might argue that this is because the theories are themselves social constructions; the search for empirical validation of them is, thus, ultimately self-defeating. One merely finds confirmation of the fact that they are social constructions rather than universal truths that explain how *all* people age in *all* contexts. For instance, the terms by which ‘successful’ aging are conceptualised are contestable, contextual, fluid, and shape what can be observed. The question of, ‘what counts as activity’ is an example. It arose in response to studies that attempted to test ‘activity theory’. But it was soon pointed out that activity does not – nor cannot- have a fixed or universal meaning. Thus, the very process of

defining activity in positivist research, of ‘fixing’ it as a stable ‘variable’, inevitably ascribes value to certain types of activity; as such, positivist research risks promulgating ideology masked as truth.

According to social constructionist perspectives, positivist research should be understood through consideration of the historical context(s) from which it emerges; and challenged on how it performs social control (Gergen, 1985). It was briefly discussed that activity and disengagement theories each reflect the historical-social context out of which they arise. In other words, they gain favour and appear as claims to ‘truth’ based on the extent to which they serve certain interests. One must thus consider possible reasons that they might be promoted at various historical junctures. Disengagement theory, for instance, may have arisen to enable younger workers to take the roles vacated by those who are older and, as such, performed a societal function in encouraging older adults to disengage and retire. Activity theory, on the other hand was partly a reaction to the negative view of aging within disengagement theory, it may also have been partially shaped by fears of an aging population and the burden this might place on western economies – including productivity of an aging workforce, and an increased burden on healthcare systems, for instance.

It was also discussed how each of these theories relies on an agentic view of individuals as independent decision makers. The ‘individual’ is itself a social construct which has been traced to humanistic ideals formed through the enlightenment. These view individuals as independent actors. As such, activity theory, particularly, has been criticised for placing the burden of healthcare on an individual, upon whose shoulders the responsibility to age well rests. It also suits a neo-liberal consumerist society which promotes consumption through ‘lifestyle’ choices. As such, those who are unable to age in the socially validated ways (due to disability or poor finances, for instance) may come to see themselves as failures according to the norms of society; in other words, as ‘unsuccessful’ (Stephens et al., 2015).

It is in discussions of the relative influence of *society vs the individual* that epistemological quandaries become crystallised, and one can see oscillations between positivist and social constructionist thinking within the literature based on the relative value ascribed to social factors vs individual factors. This relates to the issue of agency. To what extent is the individual able to exercise choice in the face of powerful social constructions, norms, ideals, or discourses? The notion that the ‘individual’ is *only* a social construct risks eliminating agency altogether and raises the question: how is change possible if individual agency is altogether eliminated? (Archer, 2000).

The current research assumes that ‘pure’ social constructionism vs individuality is an unhelpful and even false dichotomy. It adopts the perspective that it can never be entirely one or the other, and in doing so attempts to straddle these two extreme positions – of extreme relativity vs unshackled agency and unfettered individual reason. This is in accordance with many theorists who attempt to retain the focus on the importance of social constructions while retaining the notion that there may be elements of existence that are not entirely socially constructed or discursively produced. To reiterate Archer (2000) “we must neither under- nor over-privilege human agency in our analytical approach” (p. 21).

Although activity and disengagement theories have been chosen above as the two most salient examples of the ways in which discourses of social control are validated through employing empirical or scientific ‘regimes of truth’ (Foucault, 1980, p. 133), one must keep in mind that all other theories discussed or espoused within this research are subject to the same questions regarding what can be known, and how. This research is itself a social construction. It is informed by understandings of aging and gender that nestle within general post-modern questions of truth and the role of language in constructing it. However, it diverges from positivist research in attempting to recognise any claims to knowledge as limited and value laden. This attempt is most visible in the explicit, reflexive consideration of the ways in which the researcher might contribute to meaning (see the section on reflexivity, below).

Although there is recognition that meaning in this research is largely socially constructed, it also eschews the ‘judgemental relativist’ position (Bhaskar, 1986). Cruickshank (2012) interprets this term as holding “that there is no meaningful notion of a reality beyond social norms or discourse that knowledge claims can be tested against” (p. 78). Interpreting Bhaskar further, Cruickshank elaborates that there can be no basis for identifying if one viewpoint is better than another. At its most extreme, such a position eliminates the possibility of ascribing value to research. On what basis can one make any moral claims that one’s perspective should be given more weight than any other? As Cruickshank has pointed out, this quandary has resulted in many purely social constructionist researchers taking ‘covert’ moral positions.

Thus, this research privileges social constructionist perspectives which acknowledge that social reality is always constructed through talk. It recognises that perhaps the most valuable aspect of social constructionism is its focus on deconstructing knowledge and power. However, such a valuable project raises inevitable questions about how to replace what is deconstructed, and what with?



This is starkly illustrated in relation to gender as much as aging – particularly in relation to embodiment. What might be considered a judgemental relativist position is clearly articulated in Butler's (1990) proclamation that there is 'no doer behind the deed', which eliminates the individual altogether. Although valuable in deconstructing the body as a site for reifying, legitimating, and entrenching gendered power differences, it can lead inquirers down a blind alley with no way of accounting for the individual choices people make in order to change. Hence, as seen, there have been attempts to return a degree of agency to humans while retaining Butler's explicit focus on the power of discourse, for instance in Brickell's (2005) attempt to reconcile the perspectives of Goffman and Butler.

Prominent theorists of masculinity have addressed this tension when considering embodiment (e.g. Connell, Robinson). As discussed, Robinson concurs with Watson (2000), that the body cannot be reduced entirely to discourse, but has a 'visceral' element that sits outside discourse. This is not to argue that discourses do not have a profound effect on how the body is viewed, shaped, and modified. Rather, that the lived experience of having a body may not be entirely reducible to language.

While all theories can perhaps be viewed as social constructions, it is important to recognise that not all are 'created equal'; not all emerge from a positivist paradigm. And, as such, not all lend themselves easily to positivist research. The theory of hegemonic masculinity, explored above, is favoured in this research for its value in exploring the processes by which certain gendered practises are favoured over others, rather than merely labelling the outcomes of an otherwise hidden process – as Connell (1985) accused gender-role theory research of doing. Hegemonic masculinity emerged from a social constructionist paradigm which explicitly intended to challenge the formal gender theories which might lend themselves to quantification; which have attempted to 'fix' masculinity (and gender) in place, to find an 'essence' of masculinity. As already observed, the fatal attraction of such reification can be observed in the plethora of research that has conflated hegemonic masculinity with 'toxic' masculinity, or otherwise assumed it as fixed and unidimensional. Many, including Connell and Messerschmidt (2005) convincingly exposed such tendencies as unhelpful reversions to role-based paradigms.

Instead, as previously outlined, the theory attempts to account for *how* certain practices come to be viewed as masculine and to become valorised over other practises that men might also undertake. Concepts of the patriarchal dividend, complicity, and inclusivity have been integral to understanding these processes. This does not suggest that empirical evidence has not, nor cannot be, found for hegemonic masculinity. The limits to this evidence, however, are

recognised in the theory itself, which precludes the ability to find a fixed aspect to gender. The broad nature of the theory has also been recognised in the conflictual and various ways that hegemonic masculinity has been defined.

In relation to the ways in which social constructionism informs this research, then, more weighting is given to what previous research can tell us about widespread discourses on aging and masculinity, rather than ‘what’ the research has found. Nevertheless, it is accepted that various theories can be more-or-less helpful depending on the extent to which they account for contradictory findings or enable older persons to define aging and gender in their own terms. In other words, the extent to which theories are emancipatory is an important consideration in social constructionist aligned research.

Social constructionism also informs an understanding of the limits of what might be claimed in this research. It seeks to do so by considering the questions asked, the context in which they were asked, my own (the researcher’s) background and interests, and how these might shape the interpretation and construction of the themes set out in the results and discussion. The term ‘constructed’ is frequently used to draw attention and remain oriented to, the talk of the participants as something constructed based on their own lives and engagement with discourses, but also through the consideration of the interview context, and the subjective lens through which their talk is interpreted. Nevertheless, the possibility of phenomena sitting ‘outside’ of discourse is retained. This retention is seen as necessary in order to account for men’s embodied experiences without reducing these purely to language. It also furnishes a (contestable) basis upon which to make claims, without collapsing into complete relativism.

In place of complete relativism, ‘epistemic relativism’ is favoured in this research. It is aligned with ‘milder’ forms of social constructionism which are more ‘agnostic’ than judgemental relativist positions, in assuming that there may be a ‘reality’ to which talk refers, but this cannot be known (Cruickshank, 2012).

Considering the above discussion, semi-structured interviews were the favoured methodological approach because they are interactive and yield rich, qualitative data. The interviews were analysed according to a thematic analysis (TA) approach, derived from Braun and Clarke (2012). They define TA as “a method for systematically identifying, organizing, and offering insight into patterns of meaning (themes) across a data set” (p. 57). In a subsequent paper, they recognise that there are “radically different conceptualisations of themes [but] conceptualise themes as patterns of *shared meaning* underpinned or united by a core concept” (Braun & Clarke, 2019, p. 593, emphasis in original). TA provided a good fit for the aims of

this study because it is concerned with critically examining the commonalities in the ways men discussed aging in relation to masculinity.

As Braun and Clarke (2006, 2012, 2019) also note, TA offers the advantage of flexibility. However, they elaborate that it is “theoretically flexible only as a *generic* method” (Braun & Clarke, 2019, p. 592) and go on to distinguish the ways in which TA is carried out within post-positivist paradigms vs reflexive (perhaps constructionist) paradigms. For instance, within the former paradigm they identify ‘coding reliability TA’ as the approach of choice. This proceeds to establish positivist notions of reliability through the use of a ‘code book’, which Terry et al. (2017) describe as a “definitive list of codes” that is generated either deductively, inductively, or through a mix of both. The codebook, they continue, is used by at least two independent coders to establish inter-rater reliability. This codebook approach was not favoured for this research, as it is aligned with positivist assumptions about finding or uncovering ‘truth’. Rather, this research instead favours the ‘Reflexive TA’ approach described by Braun and Clark (2019). This approach is guided by a constructionist epistemology which sees the researcher’s subjectivity as a ‘resource’. Unlike ‘code book TA’, this approach emphasises ‘organic and recursive’ coding procedures that depend on the researcher’s subjectivity to construct meaning in relation to a data set. As meaning is co-constructed in this fashion, the results of the analysis are necessarily partial and contextual.

The ‘code book’ approach leans more heavily on a deductivist paradigm than the reflexive approach. But it is frequently acknowledged that TA often incorporates inductive and deductive approaches (Braun & Clarke, 2006, 2012; Terry et al., 2017). Social constructionism might be seen to be inimical to a deductivist approach due to the latter’s reliance on pre-identified themes; but, in effect, one cannot avoid the influence of pre-existent knowledge on the process of induction. As Terry et al. (2017) state, the process of generating themes can never be purely inductive, as the researcher is not a ‘blank slate’ but comes with pre-existent experiences, including theoretical preferences which ensure data analysis never proceeds purely in a ‘bottom up’ fashion (i.e. purely from the data). Nevertheless, the distinction appears to be one of emphasis and, although my pre-existent knowledge, experiences, aims, and questions inevitably influenced my generation of themes, the process of coding was, as much as possible, one of induction guided by the data.

The flexibility of TA is a distinct advantage for this study, which aims to take a broad exploratory approach to the topic(s). Furthermore, TA analysis can proceed at the *semantic* or *latent* level (Braun & Clarke, 2006). The former focusses on the explicit, surface content of the data, while the latter “starts to identify or examine the underlying ideas, assumptions, and

conceptualizations / and ideologies / that are theorized as shaping or informing the semantic content of the data” (p. 84).

This approach has some similarity with forms of discourse analysis. For instance, to uncover components such as conceptualisations, ideologies, ideas and assumptions, attention must be paid to not only what the participants say, but how they say it. From this, some assumptions about *why* they might say these can be attempted. This requires some attention to discourses. Some have made the distinction between macro-level social constructionism and micro level social constructionism (Burr, 2003). The former is associated with Foucault, who considers macro level discourse as ‘ways of constituting knowledge, together with the social practices, forms of subjectivity and power relations which inhere in such knowledges and relations between them’ and as ‘constitut[ing] the ‘nature’ of the body, unconscious and conscious mind and emotional life of the subjects they seek to’ (Weedon, 1987, p. 108). This accords with the judgemental relativism discussed above – the tensions of which have also been discussed. In micro-level social constructionism, discourse is taken to refer to face to face interactions in the form of transcribed talk (Cruickshank, 2012). It is the approach favoured by Potter and Wetherell (1987). It is also the approach favoured in this research as a possible mode of engagement between critical realism and social constructionism (Cruickshank, 2012). Although it does not primarily engage with macro-level processes, it nevertheless makes some assumptions that macro-level processes might inform talk in everyday situations.

In line with others, (e.g. Taylor & Ussher, 2001) consideration of discourses is not considered here to be inimical to consideration of themes. Themes are included as broad categories to organise the men’s talk in a meaningful way. What the men say and, on occasion, how they say it (e.g. Potter & Wetherell, 1987) are considered according to what they might say about discourses at a macro-level. For example, the concept of hegemonic masculinity can be related to macro-level discourses, particularly when considered on a global scale. The current research approaches TA in this way and emphasises the role discourses or latent themes have in constructing subjectivities in social interaction. Gender, ethnicity, and age are each intimately entwined with power dynamics (McIntosh, 1988) and various themes, influenced by ideology, shape the subjectivities of older men.

On occasion, reference is made to ‘positions’ that participants take up. This term is influenced by *positioning theory* (e.g. Harré et al., 2009) which recognises a multiplicity (2009) of selves that are constructed in talk and interaction. As such, Harré et al. (2009) discuss positioning theory in opposition to roles, which they consider fixed. A key component of this theory are the notions of rights and duties. My participants, many of whom have arguably

inhabited privileged positions within society by virtue of ethnicity, gender, and education, have arguably been bestowed powerful rights to knowledge and expertise. However, the corollary of a right is a duty; these come with being a person in a relatively privileged or powerful position. These may include duties to acknowledge the rights of those who are less fortunate, or to acknowledge one's good fortune. Although not a key feature of this analysis, positions are acknowledged to draw attention to ideologies or wider discourses (Van Dijk, 2006).

## **Chapter Six: Method**

In this chapter the methods for the current research are outlined. Information on the research design, participant recruitment, researcher reflexivity, ethical concerns, and data analysis approach are included.

### **Recruitment**

Participants were recruited from several areas within A/NZ's North Island following Massey University Human Ethics Committee approval (granted July 22, 2016). The application was submitted and accepted as Low Risk. Participants between the ages of 65 and 90 were sought. The 65 cutoff is commonly used in the literature and is also the age at which A/NZers can receive superannuation and often retire. The upper age limit of 90 was selected to allow exploration of the different ways in which development within the realm of 'older age' itself might affect masculinity and allow the exploration of transitions or differences that occur across this range. Recruitment advertisements were placed through local Returned Services Associations (RSAs); Grey Power Branches; and conducted through personal contacts. The advertisements asked interested participants to contact me, whereupon they were provided with more in-depth information. Consent forms (see Appendix A) and further information was provided before the interviews began. In most cases this information exchange took place at the participant's house. Pākehā men were not sought exclusively. Nevertheless, it was anticipated that the agencies through which participants were recruited might yield predominantly Pākehā participants. This was deemed acceptable as it the study did not aim to compare masculinity across ethnicities. Likewise, participants were not recruited on the basis of sexuality.

### **Participants**

The participants were 23 heterosexual men between the ages of 66 and 91. However, the men were not explicitly asked about their sexual orientation and, as such, this reflects an assumption. The assumption is based on the fact that all participants had discussed long term heterosexual relationships; all but one had been married to women. Moreover, none of the men referred to themselves as homosexual, or discussed sexual relations or feelings towards other men. It is acknowledged that these facts do not preclude the possibility of homosexual or bisexual orientation but are rather strongly suggestive of heterosexuality. The men were not

asked specifically about their sexual orientation so as to not risk damaging rapport. The mean age of the participants was 74.22 with a standard deviation of 7.25. Although there was a range of ages included, there was a degree of homogeneity in terms of ethnicity and sexual orientation. All participants identified as A/NZ European/ Pākehā, and included authors, psychologists, statisticians, engineers, teachers, school principals, actors, musicians, accountants, bakers. All but one participant had been married, and all were independently living in their own homes.

### **Procedure**

Interviews were conducted between March - September 2017 within the participants' homes, with the exception of an interview which took place within a public library, and another conducted in an office chosen by the participant. The research was based on semi-structured interviews with questions focussing on how men made sense of masculinity and aging, including the benefits and challenges of these (*see* Appendix B). Semi-structured interview allowed exploration of the topic of interest without too forcefully limiting the scope of what participants might discuss.

### **Analysis of Interview Data**

In identifying themes and conducting analysis, I followed the guidelines of Braun and Clarke (2012), who identify six major 'phases' in undertaking TA. These include: familiarizing yourself with the data; generating initial codes; searching for themes; reviewing potential themes; and defining and naming themes. The interviews were converted from audio format to written transcripts using guidelines provided by Silverman (2001; *see* Appendix C). The generation of initial codes was achieved largely through inductive means, although the inescapability of some deduction has already been noted. As discussed, the deductive elements arose from the literature search and introductory analysis. This process suggested frameworks of understanding which were subsequently used to help analyse the transcripts.

Following transcription, an inductive process was utilized, in which the data were read, re-read, and objects were highlighted and itemised according to nouns, metaphors, figures of speech, and other salient features. This process yielded many codes which were examined for similarities, overlaps and contradictions, and were then organised into themes. The interpretative nature of this step is a core consideration when carrying out TA based on a social-constructionist perspective. As Braun and Clarke (2019) emphasize, themes are "not 'in' the data, pre-existing analysis, awaiting retrieval" (Table 1, p. 593). Rather, themes are 'generated' through interpretation. My role in this interpretive exercise involved 'reading' the extracts for

meaning. That is, I was interested in certain aspects of aging, and thus helped to construct the findings which emerged. I acknowledge that these readings may be unique however I have tried to make the analysis transparent with data extracts being closely tied to interpretive work

### **Ethical Considerations**

Pseudonyms were used to ensure the anonymity of the participants and other identifying information was also changed for this purpose. Additional ethical considerations included the possibility that the discussion of sensitive issues may cause some psychological distress for participants. To mitigate this, participants were reminded that they need not discuss topics that caused discomfort and were asked if there was any information that they would prefer was not published. None of the participants indicated a preference for any material to be omitted.

### **Reflexivity**

Reflexivity is a crucial aspect of social constructionist research (Finlay & Gough, 2003). The interviewer in social constructionist research is complicit in creating meaning (Crotty, 1998; Potter & Wetherell, 1987). Within the interview, this complicity may be evident in the questions asked; the body language and verbal encouragers that display interest or disinterest, approval, or disapproval of particular responses. Also, the background, motives, preoccupations, and concerns of the researcher – and the participant's awareness of these – influence the construction of meaning within the interview. The interpretive work involved with the analysis adds a further layer of meaning.

These factors need to be acknowledged reflexively - to the extent that reflexivity is a conscious process that can be 'captured.' Indeed, as Gough (in Finlay & Gough, 2003) argues, the 'linguistic turn' - which questioned the ability for people to "uncover their 'real' motivations" (p. 27) - applies equally to researchers and participants. Nevertheless, it is important for researchers to consider their own subject positions in relation to the material being discussed to allow for consideration of the ways in which they may also draw on discourses – both in conversation and in analysing data.

With the caveats above acknowledged with respect to my ability uncover my 'real' motivations, I will attempt to provide an overview of some considerations that may have influenced me at all stages of this research. My initial interest stemmed from the fact that I identify as a heterosexual, Pākehā male. As such, I have experienced much of the privilege that arises from this gendered ethnic identification. I am aware, for instance, of having experienced few barriers in my career advancement or life opportunities. I have not experienced sexism,



racism, or any other form of prejudice. In this, I recognise the advantages that have been bestowed on me, not through any effort of my own, but through a culture and society that implicitly values and largely serves my interests.

Nevertheless, there is also a sense in which membership to this privileged category is limiting. This aspect is equally as interesting to me personally. While these limitations are admittedly few, I have been made aware of them at various times throughout my life. Many of these are what have readily been identified as ‘traditional’ or even ‘toxic’ masculine qualities. Chief among them is an awareness that emotional expression, and other expressions of vulnerability are not desirable qualities for A/NZ men to express. This is particularly true for contexts in which I have found myself in exclusively male contexts. Similarly, I have at times felt the pressure to embody normative ideals of what might be considered the ‘traditional’ or conventional aspects of masculinity in A/NZ, and I have been keenly aware of those instances where I judged myself to not live up to these ideals. Amongst other aspects, these include a perceived lack of proficiency in trade-related skills; and awkwardness in interactions with women. It is through subjective experience that I can appreciate these as ‘hegemonic’ ideals. Similarly, I have experienced the enjoyment and power that has arisen from ‘success’ in embodying hegemonic ideals such as in sporting endeavours and (occasionally) academic and professional life.

The project of interrogating age is one of reflecting on my own life. Although I am not over 65, I am aware of the changes that have already occurred in my own life as I have aged (I am in my late 30s). I am increasingly aware that the period commonly referred to as ‘old age’ lies before me. This has been influenced by witnessing the ways in which my father has aged. Thus, I feel the anxiety that has been discussed in relation to aging in the literature; this research project is partly an exercise in consideration of what might lie in store for me as I age.

When conducting the interviews, I became aware of the fact that discussions of “decline and loss” (Twigg, 2004, p.62) with older men can be stymied by the very constructions that help define masculinity: namely, “public invulnerability and competitiveness.” This is not to only say that the participants themselves withheld information, but also that these constructions impacted the extent to which I myself felt I could ‘pry’ into aspects of their lived experience. The very cultural forces that have hindered discussions of sensitive topics with men throughout my life also impacted my willingness to explore such topics in great depth within my interviews. Although in most instances the ‘power’ within an interview might be said to lie with the interviewer, I felt that my relative lack of life experience in comparison to those whom I was interviewing mitigated against this dynamic.

### **Research Questions**

This study attempted to address the following research questions: How do older men construct the ideals, norms, and discourses of masculinity in A/NZ? Where and when can such ideals, discourses, norms be traced to? What possible relationship might constructions of masculinity in older men have to subjectivities, as constructed through talk? Might constructions of masculinity change developmentally, in response to old age? How do men negotiate or reconstruct any potential changes in the construction of masculinity? What theory or theories of masculinity best account(s) for men's lived experience? To what extent are older masculinities in A/NZ impacted by issues related to embodiment, including physical decline and physical ailments?

### **Presentation of Extracts**

The extracts below are organised according to the discourse that they have been sorted into. They are labelled simply by pseudonym and are followed by discussion. In places, passages have been omitted in the interests of brevity and readability. Where this has occurred, it is indicated by brackets with ellipses (e.g., (...)). Each extract is followed by the pseudonym of the speaker, and their age in brackets.

## Chapter Six: Results

The results comprise a three-part structure: The first part attempts to locate the participants and their talk in relation to dominant gendered discourse. It explores how the men relate to the notion of masculinity, and what this might say about the ways in which gender is constructed more generally in A/NZ society. This talk is included in order to acknowledge aspects of the participants' identity that may intersect with masculinity (i.e. ethnicity, sexuality), and how these might relate to gendered power. The second part of the results section explores themes related to the challenges of aging, and the third part explores strategies for dealing with these challenges. While presented as discrete, these themes inevitably overlap.

### Privilege in Men's Identity Work

How did participants talk about masculinity? I argue below that 'masculinity' seemed to be elusive for the participants but, for some, was synonymous with 'being a man.' This is consistent with literature suggesting that, given its fluid, contextually-determined nature, 'masculinity' studies should be abandoned in favour of studies of what men 'do' (e.g., Fournier & Smith, 2006). Nevertheless, I retain the use of the term masculinity as a social construct prescribing a range of activities men are expected to perform.

In making sense of what masculinity means participants talk may be understood in terms of what Nicholas and Agius (2017) refer to as privilege, and its continued existence, using the frame of masculinism. They rely on Brittan's (1989) definition of masculinism, as including 'taken for granted' understandings that: "1] there is a fundamental difference between men and women, 2] it assumes heterosexuality is normal, 3] it accepts without question the sexual division of labour, and 4] it sanctions the political and dominant role of men in the public and private spheres" (Brittan, 1989, in Nicholas & Agius, 2017, p. 2 ). Briefly stated, masculinism is a 'logic or ethos' rather than an identity. As such, it can be set apart from the 'binary' of masculinity vs femininity but can shape how these are understood. It is useful for conceptualising the ways in which wider discourses tend to perpetuate gendered divisions and power structures. As Nicholas and Agius (2017) argue, the fact that this is separated from individual practises or perspectives can be seen in language of misogynistic politicians (i.e. Putin or Trump). This parallels hegemonic masculinity's ability to hybridise and subordinate challenges; and contributes to the 'backlash' against feminism. Occasionally this backlash is explicit, in other instances it is more subtle and pernicious – for example in the

ways feminism has been ‘taken into account’ and repackaged as ‘post-feminist’; or ‘achieved’ and, as such, is no longer a concern (McRobbie, 2009).

Below, several ‘threads’ emerged in relation to the theme of ‘privilege in men’s identity work’. These include *masculinity as invisible*, *gender neutrality*, and *anti-feminism*. These could be argued as perpetuating masculinism. Indeed, rather than being indicative of traditional masculinity, the men’s talk often eliminates gendered politics to implicitly endorse wider masculinist discourse and perpetuate gender hegemony.

### ***Masculinity as Invisible***

‘Masculinity’ appears, from the following talk, to remain elusive for men themselves in everyday life. This despite a proliferation of media articles in Western countries highlighting gender inequality (Gill, 2016) and, in A/NZ, questioning ‘toxic’ A/NZ masculinity. Kimmel (2007) argued that “the very processes that confer privilege to one group and not another group are often invisible to those upon whom that privilege is conferred.... Only white people in our society have the luxury not to think about race every minute of their lives. And only men have the luxury to pretend that gender does not matter” (p. 7). The processes Kimmel observes render gendered power invisible (Jourian, 2017) by subsuming and accommodating conflictual discourse (O’Neill, 2014; S. Riley, 2001). Thus, masculinity studies that ignore gendered power relations risk perpetuating existing imbalances (O’Neill, 2014). The ‘invisibility’ of masculinity is an important consideration for how these imbalances are maintained.

Aotearoa/ New Zealand has been called a ‘man’s country’ (Phillips, 1987); and the same processes Kimmel (2007) described in relation to men in the USA have also been identified in A/NZ (e.g., Cosgrove & Bruce, 2005). Pākehā masculinity represents the ‘centre’ against which otherness is defined, and has been largely invisible and unquestioned within A/NZ culture and the media (Campbell, 2000; Cosgrove & Bruce, 2005). One might also expect generational influences to affect how older men make sense of gender. The following extract illustrates the theme that masculinity is invisible:

*Ah I don’t think a lot about that [masculinity] really, just sort of, take things (I) on who I am, and, can’t do much about it (...) it’s not something I think about an awful lot (Patrick, 70).*

Patrick considers masculinity a natural correlate of being a ‘man’ as defined by biological sex; the fact that he “can’t do much about it” shows that it is an inalienable given; it is taken for granted. One cannot refuse to perform gender (West & Zimmerman, 1987); and

performance is conventionally constrained by the gender binary. Below, Leonard suggests that, as a Pākehā male, he never had to ‘argue’ his masculinity:

*I don't think that I've ever done anything because it was expected of me as a male to do it or, had that opinion expressed to me that, as a male you should ta da ta da ta da (...) um [2] so I don't think I've ever had to [1] argue my masculinity [2] would that be the way of putting it? (...) with anyone (1) you know, I've done what I thought, in most cases I've done what I think needed to be done, and I think that usually I've satisfied, anyone who's been associated with that decision making (Leonard, 70).*

Leonard asserts that he has never felt expectations to act in certain ways because of his gender, possibly because his performance of gender has been consistent with hegemonic masculinity. The invisibility of gender is reflected in the fact that no one ‘expressed’ to him that ‘as a male’ he should behave in certain ways. This is not to deny gendered expectations but to acknowledge that they are often unspoken or visible only when not performed in ways consistent with expectations. Tim’s talk, below, suggests that culture is inculcated through educational institutions which have a significant part to play in ‘normalising’ masculinity:

*At [boy's college] I suppose, there was a little bit of that, growing up to be a man sort of thing, through a boy's school, but I can't remember it being a significant...it was just the culture of the school, there wasn't sort of special messages or anything, put out there or anything like that, that I can think about (Tim, 72).*

Tim recognises that his experience at a boy's secondary school may have had some influence in constructing masculinity - despite his difficulty in articulating the nature of this education. The lack of a “special message,” and the fact that “it was just the culture of the school” work to downplay the significance of culture and how it operates; this talk points to the process of gender indoctrination within educational institutions and the ingrained acceptance of gender ideals this process produces (Connell, 2000). Like many boys attending boys’ schools, Tim received education on ‘growing up to be a man’. Nevertheless, (hegemonic) masculinity’s ‘normality’ likely contributes to the difficulty of noticing this. Below, Michael’s talk reveals the ways in which this ‘normality’ is taken for granted until challenged:

*Actually, I haven't really sort of prepared myself particularly (...) thinking about it but ah [4] I suppose really in many ways I don't have great problems with it (...) other than the fact that, you know one's getting increasingly frail (...) and will, will continue to do so probably (Michael, 86).*

Michael downplays masculinity as something he has never “had problems” with. Although this suggests that masculinity is largely taken for granted, the challenge of ‘increasing frailty’ implicitly constructs physical strength as a component of masculinity. Until challenged or ‘not-achieved’ in some way, masculinity largely goes unnoticed. Masculinity is downplayed as a non-issue or ‘not a problem’ until problematized by the frailty associated with aging.

The above extracts reveal that, for participants, ‘masculinity’ has been largely taken for granted throughout their lifetimes. But there is a suggestion in the talk of Michael that aspects of aging may provide a challenge to masculinity, and the talk thus begins to unveil the ways in which masculinity has hitherto been constructed. The data suggests hegemonic masculinity obscures the ways in which gender is constructed – as long as one performs according to its norms. Below, the talk reveals other aspects of the way in which gender is denied or negated. It centres on an egalitarian, ‘gender neutral’ discourse which constructs everyone as the same.

### ***Gender Neutrality***

The invisibility of masculinity means participants struggled to acknowledge it as a basis upon which difference (i.e. gendered power imbalances) might be ascribed. For some, an egalitarian, ‘gender neutral position’ (e.g. Riley, 2001) was taken, which argues that people are the same, and should be treated as such. Two extracts from William, below, typify gender neutrality:

*Sam: has there been times when you’ve been more aware of, gender than other times?*

*William: I don’t think so (...) I mean, I tend to look at people (every day?) on what they do, not, for gender (76)*

*It just happens that some of the committees I’m on, have got, mostly men because they’re the people who are (1) capable (...) um (1) the museum committee’s got a couple of women (1) two or three, one of them’s, damn useless (1) a liability, but (1) ah (1) it’s never been an issue for me (...) I mean, in the tramping club, we had, a lot of strong women (...) although it faded out a bit, around nineteen seventy, because the, the rock group were a bunch of individualists (...) um, sort of, meant the club ran down a bit but in 75, 76, we had a couple of strong women (...) and suddenly, it came back to life (...) and we could see it was the strong persons, not the, gender that was the issue (William, 76).*

William’s comment that he looks at people for ‘what they do, rather than for gender’ suggests that differences exist but are unimportant; people should be judged on outcomes – the functional aspect of performance – rather than gender *per se*. William elaborates this position through recounting his work experiences. Despite increasing media coverage of disparities in representation between men and women at leadership and management levels (Harris, 2018),

he constructs disparities as due to individual personality rather than structural inequalities predicated on gender (e.g., Hurst & Leberman, 2015). Below, Selwyn's talk reveals the gender-neutral theme through its conflict with a more discriminatory, 'traditional' talk which assigns qualities based on the construction of gendered difference:

*Once again as an observer (1) you hear things and see things at the bowling club (1) where some of those people in, um, (3) who see things in a more traditional way (1) are scornful of, the way that women do things (...) women do do things differently, that's a cultural thing, now whether it's um (1) um, generic or inherent or whatever, it's just a, a result of a sort of society (1) but women running things, or, discussing it and not coming to a decision or, or whatever it is or bitchiness or cattiness or, the um (2) I mean big generalisations there, but, some of them they say, oh god (1) you know oh you can't have her on the committee, you know what women are like (1) you know those sorts of comments, I'm aware of, those sort of things, but then again, maybe (1) the accusations (chuckling) are also accurate, but maybe it's not generic maybe, it's personal, to the qualities of that person, or the attributes of that person you know? (Selwyn, 70).*

Conflict appears here over whether observed behaviours are due to 'personality' (a gender-neutral construction) or gender (e.g., women's 'bitchiness', 'cattiness', 'bossiness', or inefficiency in running committees). Selwyn's awareness of his use of "generalisations" is contradicted by assertions that women "do do things differently" - although he distances himself from these generalisations through the use of third person pronoun (e.g. "some of them"). It is others "who see things in a more traditional way." This distancing itself suggests an awareness of the importance of gender politics; and serves to 'take gender into account.' Yet, he once again endorses gendered discrimination through the phrase "but then again, maybe the accusations are also accurate." In this way he takes up the 'traditional' position he is simultaneously critiquing. Ultimately, this reveals the double entanglement (McRobbie, 2004, 2011) in which the importance of egalitarianism (informed by feminism) is taken into account, while women are simultaneously constructed negatively.

Several of the men drew on an egalitarian theme in discussing equal pay. This constructed positions that were sympathetic to women. Steven's talk, below, is typical, and reveals that the participants are not 'stuck' with outdated notions of gender inequality, but have been influenced over their lifetimes by feminism:

*The legal profession I think, again, very male dominated but, yeah slowly, yeah I think it's got a way to go yet, but it's probably heading in the (1) in the right direction and I still can't get my head around, if a woman's got the same sort of, um, qualifications knowledge skills and expertise why isn't she being paid the same as a guy doing a similar or same role I mean that to me just seems bizarre (Steven, 68).*

Steven's confusion over the reasons why women are not paid the same as men reveals the strength of the egalitarian theme. His positioning is as one who is rational and reasonable but incredulous. Such a position suggests awareness of gender issues possibly influenced by media; at the time of this conversation there were many media stories about gendered inequalities in the legal profession in A/NZ, as well in A/NZ women's rugby. Ewan, below reveals an egalitarian position that celebrates the impact of changing gendered expectations for how they have liberated men:

*I love seeing , I mean, I did it when I was, married but, not a lot, because, it was still women's work and, and blah blah blah (...) but I love seeing men pushing their kids around in, trolleys today and (...) I love that, gender balance occurring, um (1) and don't ask me why, I just think it's cool, I think it's, something good that's come out of the last, fifty years or so (Ewan, 70).*

Here Ewan acknowledges his own complicity in practising gender in unequal ways, whereby he would mostly leave childcare to his wife (e.g., he did it "not a lot"). This is nevertheless justified on the basis of historical context, and thus reveals the ways in which egalitarianism impacts men, too. His talk shows the liberation of men who have traditionally been distanced from close interaction with their small children. Below, Xavier also discusses what might have once been considered 'role reversal.' However, unlike Ewan, he went against the dominant role expectation of the time that men would not take care of their children. His talk reveals how this experience was transformative in him taking up an egalitarianism:

*Oh it [looking after the children] completely changed me actually, to be perfectly honest, um, (1) it, um (1) it made me know what it felt like not to have your own money (...) um, where everything you spent had, come from someone else (...) it made me, learn how to, if not multi task at least switch tasks very fast (...) um, so I, wrote an MA thesis while looking after little kids and um*

*Sam: and, being around other men, were you, aware of your role being, different to them or?*



*Xavier: yes, because it was so, it was really uncommon then and they um (1) they didn't quite know how you fitted in either (...) um, and I think that changed my worldview more than almost anything else that had happened to me, um, it taught me that, you know, you get back what you've invested, ah, stop being such a selfish prick which is a, a sort of a, I mean, oldest male in a family, that worshipped masculinity, um, you know, it was quite useful to lean that, you weren't the centre of the universe (67).*

Xavier takes up an egalitarian subject position through considering his experiences as a stay at home father at a time when this was not as widely accepted. Of all the men interviewed, he is the only one who discussed experiencing such 'role reversal.' He constructs it as challenging due to rigid gendered expectations, or the fact that it was "really uncommon then," but also as transformative in raising his awareness of some of the difficulties women face(d). As he implies, men's privileges are largely taken for granted until disrupted – in Xavier's case by losing his breadwinner status, and assuming responsibility for child-minding. Xavier's realisation that he was not 'the centre of the universe' brought gender into sharp relief – white, (heterosexual) masculinity has been that against which 'otherness' has typically been constructed. To borrow Xavier's phrase, (white) masculinity has been the 'centre of the universe.' Below, Charles discusses how his experiences with strong women have shaped his egalitarianism:

*I've probably been saved in some ways in that I've, always been, surrounded by, pretty powerful women (...) like my [1] I don't think it would have ever occurred to my mother to be feminist coz it never occurred to her that there was any, any way other than hers (...) um, more than her, probably her sister, my late aunt, who was a sort of extra mother in a way when we lived here who's a, I think she used to get enraged if anyone accused her of being a feminist pioneer because it never occurred to her to be anything else (...) (and yet) she was, I've been ah, living with a pretty powerful charactered wife of many years too (...) so I've always associated with ah, people who've never felt hampered in the slightest by anything like that so I suppose one's own attitudes are, are coloured a bit by that (Charles, 70).*

For Charles, being surrounded by "pretty powerful women" who were never "hampered" by their gender means gender became less of an issue for him, too. He has been "saved" – presumably from sexism. The women he admires just "got on with it," implying that

feminists do not. And, they would never want to be "accused" of being feminists. Thus, although acknowledging that the women in his life could be classed as feminists for being strong, powerful women, he rejects the term itself. This differentiates 'authentic' from 'inauthentic' feminists, with authentic status belonging to those (strong) women who do not feel compelled to proclaim themselves feminists.

Charles's talk reveals that the egalitarian, gender neutral position was not necessarily synonymous with a pro-feminist position. While it is likely influenced by the work that feminists have undertaken to foster widespread acceptance of egalitarianism, the talk in the next section reveals that anti-feminist sentiment was also drawn on, and thus reveals, once again, the ways in which feminism is taken into account, yet attacked through a process of 'double entanglement' (McRobbie, 2004, 2011).

### ***Anti-feminism***

Various 'versions' of feminism have become increasingly visible in media, from 'activist feminism' to 'cool', stylish, or 'glamorous' feminism (Gill, 2016). Perhaps unsurprisingly, then, participants discussed gender in relation to feminism and feminists. However, much of this talk was contradictory in a manner consistent with post-feminism's double entanglement (e.g., McRobbie, 2004; McRobbie, 2009, in Gill, 2016, p.621). The 'egalitarian,' gender neutral theme (above) sheds light on some of the ways that feminism is taken into account. Yet, similar to what Riley (2001) observed, some men in this study rejected feminists and feminism:

*I think what's hard to take sometimes is the a, um [1] more aggressive form of feminism which [2] you know is needed like always to, if you're going to push your, point of view you've got to be aggressive doing it (...) but it certainly irritates, a lot of men (who say) oh, you know, is that really necessary to, ram it down your throat that way? (Michael, 86).*

Michael positions himself as reasonable and pro-feminism. His talk here is understanding of the need to be forceful about introducing change (tagged as 'aggressive') and the irritation experienced by men who question the need for such tactics. But, although distancing himself from an 'anti-feminist' position by attributing it to others (i.e., "a lot of men") he also re-articulates this theme. The metaphor contained in the rhetorical question: "is it really necessary to ram it down your throat that way?" constructs a strong rejection of

feminists by insinuating that some men have been ‘force fed’ feminism. Below, Charles criticises feminists from a more personal position, in relation to his daughter:

*My daughter is very a [1] quite stridently feminism sometimes which is, interesting because she sort of, loses her sense of irony and her wit when she’s talking about female issues (...) out come the slogans really but (...) I mean she had a, powerful mother and a much less powerful father, and yet it didn’t stop her spilling out all these clichés and things but I was like, but you didn’t grow up in a family like that (Charles, 70).*

Charles’s rejection of feminism paradoxically constructs a position aligned with feminism. He criticises his daughter’s feminist arguments as unsophisticated because she was raised in a family in which her mother is more powerful than her father. His position is sensible, realistic, and rational in contrast to the spurious "slogans" and “clichés” of feminism. Charles’ talk may once again reveal the ways in which men may be personally blind to the impact of gender on their lives. While he convincingly shows that the household in which his daughter was raised was largely egalitarian or pro-women, he does not take into account the world outside the household as a possible influence on his daughter’s take-up of feminism. Thus, his appreciation of feminism is limited by his own experiences and observations as a man. Ewan’s talk, below, questions the motives of feminism, and feminists:

*And so, that’s what I mean about educating about (1) power (1) because, when women set about saying, oh, we will liberate men as well, there’s once again an awful lot of hypocrisy about that as well because really they just wanted to break through the glass ceiling (1) and that’s what’s got the, concerted effort of most, ah feminists, is, is, breaking through the glass ceiling of the, mercantile, business world, and it’s not been about, as much in my view, at least, media wise (1) about, sharing responsibilities (Ewan, 70).*

Here, Ewan suggests feminists want to “break through the glass ceiling” to grasp power for themselves while doubting that they might also desire liberation for men. This talk is consistent with the ‘feminist backlash,’ which constructs feminists as aggressive, ‘power-hungry’, and ‘anti-men.’ Indeed, in different ways, each of the extracts above questions feminists as unnecessarily over-zealous, without overtly ‘attacking’ them. Nevertheless, this suggests that ‘activist feminists’ (Gill, 2016) represent the most visible form of feminism and are rejected because they pose a threat to the power that men have traditionally enjoyed. In

conjunction with a discourse of egalitarianism or gender neutrality, feminism is ‘taken into account’ yet criticised.

Although masculinity was invisible for some, others articulated qualities that are, or have been, important to them *as men*; or positioned themselves in relation to masculine stereotypes, such as the ‘kiwi bloke’. This stereotype encompasses the ‘number eight wire’ approach of creatively utilising available resources; a ‘do it yourself’ (DIY) mentality; a love of competitive and aggressive sports (i.e., rugby); beer drinking; and stubborn independence.

### ***Rugby, Racing and Beer***

‘Rugby, racing, and beer’ (RRB) emerged as a stereotype familiar and accessible to some participants. The phrase ironically captures the narrowly defined interests of the ‘typical’ A/NZ male during the 1960s. Although this ‘trio’ traditionally defined masculinity, it also limited and constrained men. Today, there are many more ways of performing masculinity than RRB suggests. Indeed, it would be naïve to suggest that this stereotype solely defined masculinity even at the time it was coined. Nevertheless, rugby and beer (racing to a lesser extent) retain a strong relationship with A/NZ masculinity as seen in association with the All Blacks (Scherer & Jackson, 2007); or in the ways beer advertising within A/NZ constructs masculinity (Gee & Jackson, 2012). It is also reflected in talk below, whether embraced or rejected. Joseph ‘takes up’ rugby as important for providing a rite of passage in his development as a man:

*Getting in the first fifteen at school gave me confidence (1) that I wouldn’t have had otherwise (...) prior to that I was, a bit of a sissy I suppose (1) I did boxing at one stage (...) um, which gave me confidence again (...) building confidence (1) and that’s what it’s all about (...) you know I can, do things now that, I could never have done years ago, I ‘ve got more (1) building confidence is the key to the whole thing actually (Joseph, 91).*

For Joseph, rugby’s importance lies in the confidence it fostered when he was younger. He considers that he was a ‘sissy’ before rugby and boxing. This gendered term applies to boys and men who fall short of ideals of aggression, strength, and competitiveness. Below, Les constructs a position that rejects rugby and its attendant values:

*We've all heard the old saying ah, rugby racing and beer (...) well, I've never taken part in rugby, ah, I have, no interest really in racing, ah, and I have never really taken to beer (...) except on a hot day (...) a glass of cold beer goes down very nicely*  
*(...) I do like some sport like (1) watching a soccer match is quite good (1) um (1) or watching a, a yacht race um, I al...I've liked um, fishing and shooting but not at live things*  
*(1) shooting at targets has always been my bag so, perhaps, some people would look upon me as a bit of a wimp: but um (1) but physical violence is, is something I, deplore (...) so I've never really put myself forward (1) as a violent person (Les, 90).*

Les equates rugby and hunting with a “violent” version of masculinity. By the standards of the antiquated RRB stereotype, he conjectures that he would be considered a “wimp” for rejecting blood sport. His apparent non-concern over the potential to be labelled a wimp suggests that ‘RRB’ no longer has the relevance it once did. Nevertheless, its visibility for Les suggests it was dominant when Les (aged 90 at the time of the interview) was in early adulthood. A broader range of masculinities has arguably become available over his lifespan, enabling Les to unabashedly take up a formerly non-hegemonic position as a ‘wimp.’

In Joseph's and Les' talk, rugby is constructed in relation to cowardice. For Joseph it is a means of developing traditional masculine strengths of courage and confidence and could be considered a rite of passage. These constructed values probably ensure rugby's strong link with masculinity. However, Les rejects rugby for its physical violence, showing that this rejection may also be hegemonic in certain contexts – indeed, one might argue that, today, non-violence has greater hegemonic appeal. The talk of Joseph and Les in relation to RRB reveals that physical aggression is integral to dominant notions of masculinity. As such, physical strength is – or has been - valued for its ability to enable personal defence or to demonstrate power, as seen in the talk related to physical strength, below.

### ***Physical Strength***

Physical strength was discussed by participants in relation to ideals of masculinity; their talk reveals the ways in which masculinity is embodied:

*In the work with violent men, or men who, can be violent (1) I've always felt (2) it was important for me anyway, um (1) to feel physically strong and be able to defend myself (...) I think, like most um, most people really, you know, you're subjected to cruel bullying and, teasing as kids at school, um (1) my father was an alcoholic who would be violent, when he*

*was intoxicated, um (2) so, I've experienced domestic violence, I've experienced bullying when I was younger, and so, for me I've always been grateful to be, and I've kept myself in I go to the gym, I exercise, it's always felt important to me, to maintain a, physical stature (...) and, that's one of the hard things about growing old, is you become, particularly as I had prostate cancer, and part of that treatment, was to reduce testosterone to zero, by having female hormones (2) and so, a cost of the amount of hormone treatment, is the loss of muscle strength (...) um, and so I've had to work hard, to regain my muscle strength once I stopped taking the hormones (1) and so I became conscious of the fact, that my capacity, to defend myself (1) was diminished (Max, 73).*

Physicality is important in helping Max feel strong and defending himself from the potential for physical violence. This is in relation to the violence he experienced when younger at the hands of his father and peers. Maintaining “physical stature” has been an essential part of Max’s self-identity. Physical setbacks have been difficult, and he has had to ‘come to terms’ with reduced muscle strength induced by hormone treatment. As he has always constructed his physical stature in relation to the capacity to defend himself, part of the difficulty of age-induced challenges to this capacity is related to an increased sense of vulnerability.

Although not directly related to an ability to defend himself or intimidate others, Peter (below) recognises the importance of physical strength to masculinity:

*I sometimes joke with people when, um (2) you know our walking group, recently (1) you know these walking sticks they have? (...) they've got extensions that you have to sort of, screw in and occasionally somebody gets one they can't undo (...) and (3) I get pleasure in help... a woman, pleasure in helping a woman, undo that (...) and I'm but sort of at the same time I'm mocking myself you know*

*S: yeah [so a bit of ironic*

*P: [I'll sometimes say, yes I'll sometimes (1) say to them, when they say thank you I'll say, no, don't worry (1) it makes me feel good to be a man (...) but I'm saying that in an ironic way (...) well, it's ironic but it's true (Peter, 69).*

Peter revels in his ironic masculine enjoyment at being able to unscrew a walking stick for a woman in his tramping group. But although ironic, phrases such as “I get pleasure in helping a woman undo that” and “it makes me feel good to be a man” contain some validity

for Peter. They also speak to the notion that discourses are powerful because they induce pleasure (Foucault & Hurley, 1978). It appears that the visible demonstration of strength to others – particularly women – yields masculine satisfaction and is thus a component of hegemonic masculinity. It is not completely clear why this is so; it may be part of a system of gender relations (e.g., the ‘heterosexual matrix,’ Butler, 1990) in which such demonstrations are constructed as sexually attractive.

### ***Do it Yourself***

The ability to ‘do it yourself’ (DIY) in relation to work around the home was identified as an important component of masculinity by most of the men, providing a source of pride or satisfaction. It was sometimes constructed as a quality pertaining to A/NZ men particularly. Max’s talk, below, constructs the ability to DIY as a gendered expectation placed on men:

*I think there’s a strong (3) being Mr Fix it, um (1) Mr do it yourself-er (1) and, men who are, incompetent at fixing things and maintaining things and, doing a bit of landscaping or, do it yourself kind of jobs (2) I think they (1) feel somewhat diminished (...) so there are expectations that a man will provide, there are expectations that a man will be able to, repair things, and, certainly attend to the repair (1) if you can’t do it yourself at least it’s your job to, find the mechanic or, the plumber or, or whatever (...) and to oversee, if you like, be the project manager, if you can’t do it yourself (1) um (4) yeah, I don’t think we’re well developed in the role of the sensitive lover (...)*

*S: Are you a Mr Fixit man?*

*Max: I’ll have a go at things, yeah (1) I’ll sometimes make them worse than they were {laughter} But um, yeah it’s something I’ve just gone to, I’ve felt (1) it’s my role, to do that (1) it’s what my partner looks to me to do (Max, 73).*

Max conjectures that men who cannot meet the DIY standard or “Mr Fix it” ideal of A/NZ masculinity may feel “diminished;” he also constructs it as something expected of him by his partner – showing that others’ expectations shape masculine performances in this way. Where the work exceeds the capabilities of men, Max constructs control and organisation as important through the assertion that men are expected to be the “project managers” who find contractors and oversee work. Additionally, he constructs provision as an important expectation placed on A/NZ men. However, while DIY is valued, Max self-deprecatingly jokes that he sometimes makes things worse than they were before. This form of humility might

be considered an essential, stereotypical, feature of A/NZers that underlies the ‘tall poppy syndrome’ - the supposed tendency of New Zealanders to undermine those who boast of success (e.g., Holmes, Marra, & Lazzaro-Salazar, 2017; Woodhams, 2015).

Below, Zane supports the notion that A/NZ culture has inculcated a strong discourse of DIY for this generation of A/NZ men:

*Oh I was just a do it yourselfer kind of guy (1) I was, brought up with the DIY I mean our father built all our houses for us (...) I mean, why hire someone else to do it, when you can do it yourself? {laughter} (...) yeah, um (1) not like the Aussie kid in the sandpit (Zane, 73).*

As seen above, Zane was “brought up” with DIY, suggesting that it is an essential component of A/NZ masculinity instilled from an early age. In addition to familial influences, Zane’s reference to the ‘Aussie kid in the sandpit’ shows media’s importance in circulating such nationalistic discourses. The advertisement presents children ‘playing’ at being men; an Australian child, in contrast to a A/NZ child, relies exclusively on tradesmen to get a home improvement job completed.

The reasons for DIY’s importance are unclear but may relate to demonstrating skill and competence – as suggested by Max’s assertion that men who are incompetent may feel diminished. It may also represent an extension of the pragmatism of the pioneering spirit identified by Phillips (1987) that involves solving problems with limited available resources. As such, it is borne of the necessity of self-reliance and independence. These qualities emerged in places through a reluctance to ask others for help, suggesting that dependence might diminish one’s sense of masculinity. This is supported by the talk of Patrick, below:

*Yeah, well you try and do your own thing, as much as you can and I don’t like, depending on other people (Patrick, 70).*

Patrick values doing his “own thing,” and dependence on others is to be avoided. For Anthony, below, the value he places on independence prevents him from moving into a retirement village:

*I could have a, two-bedroom apartment in the retirement village (...) for 700,000*



*Sam: and what, what stops you from doing that? I mean the benefits you've mentioned would be, you know there'd be more people around and*

*Anthony: It would probably reduce my, um, independence if you like, I'm still, is that part of masculinity, independence? I suppose it is (72).*

Anthony elsewhere suggested that he is lonely and therefore recognised the benefits that retirement village living would have for providing company. However, the value he places on independence as an explicit aspect of masculinity is such that, despite these advantages, he chooses to remain dwelling alone. His talk also reveals the extent to which the retirement village is constructed as a terminus of sorts; a symbol of dependency from which there is no going back. Whether the retirement village would 'actually' reduce his independence is irrelevant; that it is constructed as such is important. Below, Reginald extends the discourse of self-reliance to personal finances:

*To be successful, in my mind, you've got to be, financially secure (...) interesting that I said be financial as the first thing I think of, but I think if you are, financially, I'm not talking about being rich (1) but, having enough to make your life easy without being a burden on others, really (...) to be successful, that's the financial side of things (Reginald, 69).*

Reginald here constructs financial independence as a marker of 'successful' masculinity. This was also alluded to earlier by Xavier, for whom not having control of his finances was difficult. Reginald constructs independence and self-reliance through the importance he attributes to not being a burden on others; to being self-sufficient.

### ***Masculinity as Constraining***

As mentioned above, the rugby racing and beer stereotype was constructed by some as restrictive. A discourse of masculinity-as-constraining was further constructed in talk of situations where the men felt they could not disclose personal information to other men:

*Sam: do you have a lot of, male friends still? (2)*

*Anthony: ah (1) not a lot I mean a lot of acquaintances ah (1) um (1) friends I could sort of go and talk to, about personal problems probably, ah, I might have one (72).*

This short extract suggests that it is uncommon for men to disclose “personal problems” to other men. Although he has “a lot of acquaintances,” Anthony “might have one” friend that he could disclose personal problems to. In this way, masculinity can be seen as limiting in all-male contexts. It also suggests that this constructed barrier to personal disclosure might have a role in making men more vulnerable to loneliness, in line with previous research (e.g., Cleary, 2005, 2012). Michael’s talk, below, expands on the discourse that masculinity limits personal disclosure:

*Sam: do you feel it’s easy talking to, I mean you’ve got a friend that you talk to about [1] personal things and*

*Michael: well I could if I needed to (...) but I don’t think I’ve ever done that {laughing} (...) I don’t think I’d ever really feel comfortable doing so unless I was in a desperate state (86).*

Although he “could” talk to a friend if he “needed to,” the fact that he has not is telling for what it reveals about barriers to disclosure among A/NZ men. As he reveals, he would not feel “comfortable” doing so; only under the extraordinary circumstance of a “desperate state” would he consider it. Peter, below, explicitly relates non-disclosure to masculinity through a metaphor of being occasionally subservient to ‘blokeish’ masculinity:

*I, I feel at times I’ve been captured in (1) to, a self-attitude to masculinity which (1) constrains me in ways that I wish it didn’t (...) but I don’t, do much of that {chuckling}*

*S: can you talk a little bit more about that?*

*Well (1) um (3) it’s (2) I s’pose one way I was thinking about it earlier today is that, I find it hard, often, to relate with men on an emotional level (...) so I find it easier to make contact at an emotional level with women (...) I, I’ve, that’s been a pattern in my life that I’ve realised that, I can quite quickly say something to a woman about my own, emotions or, feelings or, whatever that I just wouldn’t say to a man (...) so New Zealand men banter (...) and sometimes the banter can be quite, revealing (...) but, um, it’s, it’s below the surface (...) ah (1) so I guess that’s, that’s probably a major thing (...) ahm we have a sort of a joke, my wife, and I sometimes, I’ll do something which is a bit blokeish and I’ll say {in deep voice} I’M A MAN! (...) and it’s a just a recognition of that sort of thing which I, get, caught up in willy-nilly (Peter, 69).*

Talk of being “captured” reveals how the powerful discourse of ‘blokeish’ masculinity appears to ‘take over’ through “constraining” the ways in which Peter communicates with other men. The phrase, being “caught up willy-nilly” develops this metaphor by suggesting he is reluctantly ‘pulled into’ a form of masculinity he does not value, or that he is even ashamed of. Although it is unclear what Peter means by “self-attitude to masculinity,” it is possible he is referring to a “blokeish” way of behaving and thinking about himself. His simultaneous awareness of the limitations all male contexts place on expressiveness coupled with his constructed inability to ‘escape’ this behaviour appears to lie behind his “wish” for it to be otherwise. He appears almost powerless to oppose this version of masculinity, and this reveals the strength of traditional masculinity.

Conversely, Peter reveals that he is “quickly able to say something to a woman” about his emotions, suggesting these barriers to disclosure are removed around women. The contextual nature of hegemonic masculinity is apparent in this talk. Men are not expected to express emotion to other men; but women can be confidantes. Men “banter;” and one must look “below the surface” to infer what emotions or meaning might be lying underneath. Women’s ‘talk’ (as opposed to banter) is conversely constructed as deep, allowing conversations with women – and one’s performance of masculinity in this context - to be ‘deep’ as well. The conflict between the ‘bloke’ and the ‘sensitive man’ discourse is reflected in the “irony” with which he plays the ‘bloke’ role in the company of his wife. The insinuation is that, among other men, ‘the bloke’ is performed without irony. Although this is revealed as a “pattern” throughout his life, it is clear from his talk that these contextually determined performances of masculinity persist into older age. Below, Hamish extends masculinity as constraining disclosure of health matters:

*But blokes still don’t, I don’t know about your generation but, I get with my mates, who would never discuss anything like, ‘Oh, I went to ah, I had my prostate checked the other week, yeah everything’s fine’ (1) you’d never say that to your mates (1) you know? You talk shallow stuff but (1) your fishing, ah, been on a holiday, all the shallow stuff (1) whereas women, they go right into the in depth (Hamish, 69).*

Although Hamish discusses it in relation to having one’s prostate checked, the inference of masculinity as being shallow is similar to that of Peter’s talk, above. The example is telling for the relation it has to masculinity and health. A robust finding in the literature is that men are less likely to seek help for health complaints (e.g., Addis & Mahalik, 2003; Courtenay,

2000; Himmelstein & Sanchez, 2016). Hamish's talk extends this by suggesting that men are reluctant to talk about it with other men, revealing a more general avoidance of health disclosure or perhaps embarrassment that may be related to hegemonic masculine notions of invulnerability. Like Peter, Hamish constructs talk among men as "shallow" while women's is 'deep.' Hamish also ponders whether the disinclination to disclose is generational. Below, the question of generational influence on constrained expressiveness is further considered in relation to the theme of the 'stiff upper lip.'

### ***Emotional Containment***

Related to the theme of masculinity as constraining disclosure, some participants recognised a dominant theme of masculinity as involving containment of emotions- particularly sadness, vulnerability, or love:

*Masculinity, in the old days it was the, you know, stiff upper lip (1) I remember quite distinctly, my old man went to a funeral in town up here and I, I must have been about thirteen or fourteen (...) dad went to the funeral of this guy he'd been to the war with and he, he had a son about the same age as me (...) and, my father made a very, um (2) laboured point, telling me how this guy's son was like a rock at the funeral, and this was so important (1) and that was the old, stoic, no tears no emotions sort of thing as if, he was almost saying that, if it happened to him, he'd want me to be like that (...) I could never remember having a cuddle from my father, and he (1) never showed any emotion (Frank, 77).*

Frank's anecdote constructs the discourse of the 'stiff upper lip' as defining a masculinity that belongs to "the old days" - a previous generation of men. Nevertheless, this is discussed as part of the way he was brought up, as the anecdote illuminates. This may have influenced his own notions of masculinity. However, as alluded to, older men are not stuck solely with 'outdated' notions of masculinity but are also influenced by discourses as they emerge over time. Hence, in reflecting on his father's difficulties with showing affection, Frank distances himself from this generation and positions himself as one who values emotional expression. This is arguably more congruent with today's 'zeitgeist,' in which emotionless masculine performances in the context of parenting are likely to be labelled as 'toxic' and limiting. While for Frank the 'stiff upper lip' belonged to his father's generation, Xavier considers that emotional containment has persisted in his own:

*Basically, men of my age were sort of brought up to, you know, be staunch and, you know, harden up and, um (1) (...) women's roles and sort of, behaviours and things have changed massively since we were all, sort of young and in our formative years and I think, often (1) a few just sort of completely anecdotal ones within a relationship one partner's changed and the other one hasn't and yeah things get difficult (Xavier, 67).*

Xavier, like other men, was “brought up” being told to be “staunch” and “harden up.” The quality of being hard traditionally defines masculinity in binary opposition to femininity’s ‘softness.’ Xavier constructs hardness as also damaging for impacting on relationships later in life – including older age. In contrast to the masculine ‘role,’ Xavier constructs women’s roles as more flexible, or progressive; this difference can lead to relationship difficulties. While men’s constructions of masculinity may change as new opportunities for defining and taking up different masculinities appear, Xavier’s talk suggests that traditional masculinities also persist throughout the lifespan. Indeed, Xavier constructs this version of masculinity as rigid and resistant to change, which one might expect based on its quality of ‘hardness.’ As with Frank, however, Xavier rejects this “staunchness”/ “harden up” theme by reflecting on it. In each of these extracts, then, masculinity is constructed as limiting, constraining, and damaging to men by placing them at risk of alienation.

### ***Provision***

The ability to financially provide for family has been a traditional marker of masculinity, encapsulated in the notion of the ‘breadwinner.’ Some participants took up positions as responsible breadwinners through discourses related to provision and protection for their families:

*Um, it's ah the ability to provide for your partner and Family (...) and, ah, in that regard ah, you know, house husband is a, modern phenomena that, um (...) I would perceive as reducing a man's masculinity (...) rightly or wrongly (...) the breadwinner, the defender, the (...) all that sort of thing (Anthony, 72).*

For Anthony, above, not being able to be meet the ‘provider’ or breadwinner expectation would ‘reduce’ one’s masculinity. Consequently, Anthony rejects the “modern phenomena” of the “house husband” as non-masculine. This appears to be a rejection of household work and childcaring as belonging to ‘femininity,’ and thus re-establishes traditional

gendered divisions based on roles expected of men and women. The provider discourse represents a ‘traditional’ masculine discourse relatively resistant to change. So too the ‘defender,’ who might be expected to display physical strength and courage. Below, Max also constructs the provider role as important, yet with more of a critical, impersonal distance:

*I think for New Zealand men there's been a strong influence on the man as provider (2) and I know from my work with men that, men who've been unemployed, or (1) suddenly find themselves redundant, and, have to realise that they'll never be employed again (2) men who've been made redundant in their mid-fifties or whatever, have got to face the prospect that they'll never be employed again (1) so (1) I know that, men who, suddenly find themselves, unable to provide for their family, and, um, not wanted in the workforce (1) has been quite devastating (1) and so, I think we've got a strong ethic, of being man the provider (1) um, I'm not saying other cultures don't have that as well, um, but I do think that is a strong, ethic, in New Zealand (1) male consciousness (Max, 73).*

Max reflects on the importance of the provider discourse for most A/NZ men; the loss of provider status, induced by redundancy, represents rejection, or being “not wanted.” It is therefore “devastating” because it represents a loss of masculine identity. However, while he is able to see the importance of this discourse, it does not appear to have the same personal resonance for him as it has for Anthony. As such, it is hard to ascertain the extent to which he has felt pressure to perform the discourse of masculine provision for his family. It may be, once again, that the ability to critically reflect on this pressure demonstrates an ability to resist it to some extent. The next extract constructs provision, but also sacrifice – provision’s essential corollary:

*Well if you decided to get married and have a family and things like this well you've got to provide for them so it's a choice you've made so, yeah, I like to do things properly (...) so, you know, my way of doing it properly was to (2) keep them fed and clothed and a roof over their head (...) you know, I've always, tried to be a provider if that's part of masculinity or not (...) I guess it is I've always, been employed or self-employed in one way or another I've never been out of work (...) I was doing, sort of two jobs and kept, kept the wolf from the door and things like that and um, yeah, um, it was all go trying to pay the mortgage, and, keep a roof over the head and the family fed and those sorts of things so I've always been a, a, worker (...) never had much of a social life or, or masculinity life or anything like that*

*because I've always been at work up to eighty hours a week, some jobs (...) so I haven't had much time for, those types of things really, you get home and have something to eat and have a sleep and then you're back off to work again (Liam, 78).*

The importance Liam attributes to provision can be seen in its relationship to doing things 'properly.' Provision follows from marriage; it is defined as keeping his family "fed and clothed and a roof over their head." He has "always been a worker," and this has been in service of "keeping the wolf from the door." With this figure of speech, Liam constructs his working life as one of making ends meet rather than accumulating wealth. This might reflect Liam's 'working-class' background - he was a baker for much of his working life. The importance of provision is also evident in sacrifices Liam made, working two jobs up to 80 hours each week to provide for his family and forgoing a social life in doing so. Although "masculinity life" is unclear, it is opposite to his life of hard work, and may be similar to the trope of the 'playboy' type lifestyle, involving conspicuous consumption, womanising, and socialising. Below, the way in which Les constructs provision also encompasses sacrifice:

*I, always, wanted my daughter, to have a better, chance than I had (...) because I was brought up in wartime days you see (...) so um, I made sure that, even if I had to put off, getting a new car for a few years (...) so, um, she ended up with about nine years of university (...) and, absolutely no debt (...) so that was one of the things that I was able to do (...) just to get her going, um (3) and um, as regards to the family, well, as I say, we're financially secure (2) ah, it hasn't been easy (1) ah, because (...) I started on the bottom rung (...) ah, and studying part time (1) has not been easy (...) so I ended up, quite high up (...) ah, so it's been a struggle, but, nevertheless it's paid off (1) ah, I like to ,think that, I've left the family, ah, in good nick (...) ah, so, if I went tomorrow, they'd be alright (...) so I think that (1) could be construed as (1) a good, masculine, approach (Les, 90).*

As can be seen, Les constructs provision in relation to his own experiences growing up relatively deprived in war time. Consequently, provision involved ensuring his daughter "had a better life than he did" through being debt free and receiving a good education. This establishes provision in relation to selflessness. The 'cost' of this selflessness is evident in the sacrifice of delaying major purchases such as a car. The importance of provision – of becoming "financially secure" is

also evident in the hard work of getting there. Phrases such as “it hasn’t been easy”, and “it’s been a struggle” attest to this difficulty, and resonate with Liam’s talk, above, regarding the responsibilities of the provider. Nevertheless, as a skilled civil servant he has been able to accumulate wealth so that his daughter can enjoy privileges. Pride and a sense of achievement stem from this self-sacrifice. As Les concludes, this could be “construed as a good, masculine approach.”

As the participants’ children had all reached adulthood, the obligation to continue providing had perhaps lost some strength. But, where the men deemed that they had successfully provided, where their children had become self-sufficient or had reaped the benefits of their fathers’ hard work there was a commensurate degree of satisfaction. In some of the talk, however, sacrifices in service of financial provision caused regret. ‘Provision’ was generally powerful in the satisfaction it induced. But it was also constructed as constraining in places – as necessitating a ‘trade-off’ in terms of time. This can be seen in Tristan’s talk, below:

*Sam: did you ah, participate quite a lot in, bringing up the children and?*

*Not as much as perhaps I should have (1) ah (2) you know it’s ah (1) probably a, um [2] a bit of regret but you know, they respect me*

*(...) (1) I disappeared a bit you know golf (...) it’s a day away you know*

*S: so just a small amount of regret over that?*

*(...) yeah, especially in the early days when I was working overtime and ah, Saturdays and things like that (Tristan, 84).*

The constraints of masculinity-as-provision are visible here. While golf also took him away from spending time with his children, he considers the overtime he worked - presumably to provide financially for his family - as having a negative impact. Although understated as “a bit of regret,” the ‘opportunity-cost’ of financial provision can be seen in this regret at not being more involved in their care.

However, respect appeared to partially offset this regret, perhaps highlighting the functional importance of this construct to A/NZ men. In other words, respect is gained through financial means, and is a form of *masculine capital* used to offset other ‘losses’ – such as loss of the position of the ‘family man.’ Tristan’s justification that his children “respect” him reveals the tensions between one’s own desires (e.g. golf, leisure), responsibility to provide financially, and the



sacrifice this can take in terms of time spent with family. This tension – and regret – may be more profound for men of this generation due to societal expectations to be the sole breadwinner rather than look after children.

### **Aging and its Challenges**

Although some of the challenges that aging presents have already begun to be seen (e.g., ‘regret’; loss of physicality), this section focusses more explicitly on these. In considering the challenges of aging, many participants also construct values that appear to be important to them. Before exploring the challenges of aging, however, it is important to acknowledge that some questioned the very construct of aging itself, as seen below.

#### ***Age as Constructed***

In a similar manner to the ways in which masculinity was invisible to some participants, aging was often not noticed – or only occasionally so. This prompted realisations that aging is socially constructed rather than ‘inhering’ within the individual. Although not a profound ‘challenge,’ it is included as a challenge here because it suggests that older people are judged on their appearance regardless of how this judgement might fit with their subjective experience. In other words, it involves navigating the expectations of others to act or behave in ways that befit an ‘old person.’ Below, Selwyn alludes to these expectations through revealing the ways he does not conform:

*There was a vote, for something, and there were eighty-seven people there (...) an amazing number of people but, the thing is I left it to be quite late and there was all these vehicles and I said to myself as I walk in, shit, it’s full of old people (2) so that was um, two thousand and um (2) it was two thousand and twelve, two thousand and eleven around about there (...) so it’s, not long ago but I walked in and thought, still saw myself as a young person (...) and um, relatively speaking, um, chronologically I was (...) um, but, it’s a state of mind (...) you know? And um, it’s the same as playing bowls you do something and then you go scooting up the green (...) you just automatically did that, now, and every now and again you think, shit, no one else is doing that (1) they’re old people (...) but that’s just what you’re used to, you know? (Selwyn, 70).*

Selwyn illustrates how aging can be something constructed by others’ expectations. He does not ‘feel’ old on the inside and thus, aging is a “state of mind.” He occasionally finds

himself automatically acting as a young person would, for instance, by “scooting up the green” while playing bowls because this is “what [he’s] used to;” in other words, he has not ‘learned’ to act old, and thus does not think of himself as such. This suggests a performative aspect to aging. This is also constructed by Michael, but with an important caveat:

*In terms of (1) getting older, I mean I, didn’t look at myself as getting old at fifty, um, and I worked until I was seventy five (...) in the company so, at that stage I was lucky, I looked younger than I was (...) and ah, people didn’t expect me to be, an old person (...) in fact I still don’t feel, an old person (...) other than, in joints (Michael, 86).*

Michael here appears to construct a ‘Cartesian split’ between mind and body. He does not *feel* old, other than in his “joints.” This suggests that, physically, aging has impacted him, but his sense of self is of someone who is “still” not old. As he constructs it, he has been lucky to look younger than he is for much of his life. Thus, the responses of others to one’s appearance are integral to age as a construct. The participants’ relationship to aging is dependent on how others relate to the participants. Below, Liam expands on the arbitrariness of ‘old age,’ and its dependence on health, appearance, and performance – as judged by others:

*[Aging] hasn’t worried me ‘cause I’ve kept my, my health’s been good and things like this so, well I’m sure aging does worry a lot of people that have problems but ah, I haven’t had problems so (...) I’m seventy-eight but I don’t feel seventy-eight {laughter} I don’t feel over fifty sort of thing, you know, so what’s seventy-eight sposed to feel like? You know (...) when you’re, when you’re thirty and you see someone like me walking down the street and you’re like oh look at that old fullah there, you know (...) but, when you get there it doesn’t feel like that at all (...) well in our opinion anyway (...) if you were, on a walking stick and hobbling up the street you’d be, oh I’m not very good but, so for a lot of people, um, aging is not a good thing it’s, it’s very hard, you know? (Liam, 78).*

For Liam, age is something imposed by others. As he states, to a thirty-year-old, he might look like an “old fullah” but, due to his relatively good health he does not feel old. As he asks, “what’s 78 supposed to feel like?” His rhetorical question points to the arbitrariness of categorising people according to their chronological age; it undermines expectations that, because of one’s chronological age, one should act or feel a certain way (i.e., as ‘old’). As he points out, however, for some people, aging is hard – particularly those who have experienced

physical setbacks and consequently perform older age in ways consistent with what is expected of 'old' people. Such performances include carrying a "walking stick and hobbling up the street." Potential ramifications for older men who are constructed by others as old are explored below.

### ***Usefulness and Respect***

The importance of being respected was evident in critical awareness that society does not generally respect 'old' people; discussion of the challenges that retirement can present for men; and the importance the men themselves place on remaining respected. Respect was often inseparable from a feeling of usefulness. These two are therefore discussed together as corollaries. As seen in the previous section, aging is sometimes felt because it is imposed by 'others.' Max's extract, below, explores this as a challenge for many men:

*I don't think [older people are respected] generally, in our culture (1) I think, in more traditional cultures, older men (1) are much more valued (1) there are roles for elders, elders are consulted (...) ah, elders are not consulted in this culture (1) and there is that whole thing of, people going into retirement villages or, nursing homes and, feeling (2) unwanted, unappreciated (...) um, that's not so strong for me personally (1) because I've been involved as an elder in the pathways to manhood programme for instance, so I've, made myself available (1) as an elder (...) um, but I think that's (3) that's not very general (1) I think a lot of men, who hit retirement feel worthless and unwanted, and a bit of a loss once the actual, employment role, is taken from them (2) that manly provider employment, and the whole, identity of, who you are (2) once that's taken, away from a person, then, um, I think a lot of aging men, feel redundant, feel unwanted (1) and at, a bit of a loss, as to what to do with themselves (Max, 73).*

Max discusses aging as challenging for men due to the lack of respect for older people generally. He draws on a cross-cultural analysis to do this. Other, "more traditional" cultures, with whom he aligns as an 'Elder,' provide roles and therefore value to older people; Max seems to suggest that in Western cultures these have been stripped from older people –older men particularly. He constructs this as particularly true for men given that they have often defined themselves through their employment and career roles. Again, the negative effects of the masculine imperative to provide can be seen in the erosion of identity and respect once the opportunity, or necessity, to perform provision is removed. Older age for men is thus constructed as a 'void' bereft of other opportunities to gain respect; the worth gained from

work is replaced with a sense of worthlessness. Patrick reflects, more personally, on the impact of declining activity on the respect with which he is treated by those closest to him:

*I've got a younger son (...) I think he's actually getting a bit more used to it now but he's ah (1) almost treating me with disdain getting older, you know, that I wasn't, quite as active as I used to be (1) But ah, he's just bought himself a fishing boat, so, he's still looking at me to go fishing with him, so it's not been totally lost, but um (3) yeah, it's, I guess you are treated a little differently, with old age, people just realise, you can't do the same sort of things (Patrick, 70).*

Patrick recognises that others treat you differently in older age based on a change in activity levels. His relationship with his son has changed and framed as “almost treating [Patrick] with disdain.” Disdain is antithetical to respect. However, this ‘disrespect’ should not be overstated. Despite not being as active as he was, his son still goes fishing with him. This ‘almost disdain’ suggests that activity and physical ability are masculine qualities through which masculine capital, in the form of respect, can be accumulated. Where activity is challenged, capital becomes harder to accrue.

Given the ‘dangers’ of being disrespected or undervalued, it is unsurprising that many discussed the importance of remaining useful and ‘keeping up’ with changes. This appeared to earn respect for some participants:

*You get respected a lot more*

*S: do you? Okay (2) because I've seen that (...) older men um, in some instances, have a bit less respect they're written off as, I don't know (1) [grumpy old*

*Joseph: [it depends, if they stay at home and do nothing and grizzle all the time, what do you expect? (...) but if you get things done and are helpful, ah, to people, you get the treatment (...) go to an old people's home you'll find, plenty of people like that (...) I mean they, you've gotta do things (...) there's no use, hanging around is there?*

*S: is that why, you think, some men end up in, old people's homes, they=*

*Joseph: =they're living in the past (...) no use living in the past (91).*

Joseph considers respect as important and asserts that he gets more as an older man than he has previously. This contradicts participants' talk above, which identifies a lack of

respect in the way older people are regarded in Western societies. However, as Joseph constructs it, respect in older age is contingent upon ‘not grizzling’ and remaining active. The archetype of the ‘grumpy’ old man is, for Joseph, found in the image of the “old-people’s home” resident. “Get[ting] things done” and being “helpful” are ways in which respect is to be maintained as one ages. An emphasis on living in the present is also constructed through the importance of not dwelling on one’s life, or “living in the past.” Similarly, Les constructs remaining useful in his role as neighbourhood watch coordinator as a way of remaining respected:

*A feeling of being useful (...) th...that’s the key I think (...) that you um, even though you’re working ah (1) and some of it is quite (1) not a tedious, but, you’ve got to be deadly accurate on, if you’re giving out reports (...) ah, so um, it is quite um, ah (2) difficult (...) to do (2) but by doing it (1) I like to think that, it’s useful in the sense, of passing on information (Les, 90).*

Les points to the importance of remaining valued in older age through a “feeling of being useful.” Usefulness is important for gaining the respect of others and for enjoying older age; as he states, “that’s the key.” Les achieves this through neighbourhood watch activities - a form of social activity that is of service to others. The challenging nature of the tasks also appear to provide appeal. As he states, “you’ve got to be deadly accurate...if you’re giving out reports.” He continues below with regard to the importance of maintaining certain standards:

*If you look, and act, decrepit, then you are going to be regarded in a, a different light (...) um, ah, perhaps if I, ah, walked with a walking stick and a limp, it might be different but (1) I can step it up with the best of them (...) so they don’t treat me too differently (...) in the (1) my contacts in the police um, are all pretty much younger than me ah (1) the constables are getting younger every (...) as they say (1) ah and um, perhaps most of them would regard me, perhaps as an elder statesman or something like that (...) um (3) b...but, certainly there’s been ah, no lack of disrespect in fact quite the opposite (...): so um, there is that certain (1) satisfaction that you’re doing something useful (...) I’ve got to be careful (1) that I don’t miss, any particular suburb (1) out of my weekly, ah, broadcast (...) because, if I miss a week, the next thing I know I’ve got people sending me emails (...) asking me, if I’m alright (...) they think I might have fallen sick or something (...) ah, so I know that people d..do appreciate (1) getting them (...) and that’s another thing of course (1) appreciation for what you do (...) it’s (1) satisfying (Les, 90).*

Similar to the talk of Joseph, above, Les considers that “if you look and act decrepit then you are going to be regarded in a different light” but because he can keep up, or “step it up with the best of them” he receives respect (framed as the “opposite” of disrespect). This suggests one should remain active and engaged in society or risk losing respect. This shares similarities with the talk of others, above, which recognises that age is frequently constructed on the basis of appearance. It fits with an active aging discourse that suggests a pressure to not appear ‘old’ or disengage, lest one be judged negatively. It might also be considered a component hegemonic masculinity which, as argued earlier, discourages men from taking a position of disability (Lindemann & Cherney, 2008). Although this appears to give Les personal satisfaction, the expectations of others appear to provide an imperative to remain (relatively) fit and active. For example, if Les was to “walk with a walking stick or a limp” he might be disrespected; and, if he misses a suburb in his neighbourhood watch “broadcast” others begin to assume he has “fallen sick or something.” But this is not constructed as bothersome for Les; rather, it serves as evidence that people notice him, and appreciate what he does. The fact that it is not bothersome may be due to Les’ ability to maintain relative fitness and agility – age has not significantly disrupted his status as an able-bodied man (relative to age-related expectations). This appears to be a status he has enjoyed his whole life. His privilege in being able to embody the ableist aspect of hegemonic masculinity should thus be acknowledged here.

Another key consideration for some participants was ‘keeping up’ with technology:

*You can actually, when I get with friends and I talk about, well why don’t you, text me? Oh no I could never, oh no I can’t work that one out no, no, and you think, well it’s dead simple (...) and I’ll put my ears back and have a go at any modern tech, stuff, if, if there’s a problem on a computer I’ll have a go, and my wife who’s been on computers with accounting, all her working life (I) she’ll say how did you do that? And I’ll say, well, the number one rule is, if in doubt, right click (laughter) things come up and you think oh, well, maybe it’s this (...) if you don’t, try these things, you’re not going to move ahead are ya? (...) you might stuff it up (laughter) (...) you’ve just got to be careful how far you go (Hamish, 69).*

Hamish constructs the importance of “putting his ears back” and attempting to solve computer related issues. He articulates a theme of defiance and positions himself in opposition to other, older people, who are reluctant to embrace technology and do not even try. “Moving

ahead” is important to Hamish and thus, ‘standing still’ or ‘getting left behind’ are implicitly constructed as opposites. Below, Xavier discusses aging in terms of adapting one’s skillset:

*The other thing I’ve always tried to do, and not always successfully, is, I see a lot of my friends who say, look, the world’s gone to shit you know and it’s just appalling, and I sort of say, look it’s not it’s just different and, the skill set that you need to operate in this world, is not actually the skill set that I grew up with I have another skill set, it was fine, it ser...served my purpose absolutely perfectly for my working life um, and now, people are doing it differently because it, you know, it may not be as good, but, it’s different and that’s the best way to look at it (...) um, and I think, for lots of men especially, given that they’ve mostly been the, the main, um, earner throughout the, the family’s career (...) that gradual, erosion of power, I mean I suppose I saw it with my own father (Xavier, 67).*

Xavier identifies friends who have resisted change in the world and positions himself as someone who has adapted in ways his friends have not. He emphasises the importance of gaining another skill set to deal with change. A key motivation for ‘keeping up’ is its opposite: getting left behind. The subsequent loss of power and prestige that comes with losing one’s career role as a defining feature of one’s identity also appears to drive the apparent desire to keep up. One must adapt or risk becoming useless or irrelevant. For some, voluntary work appeared to demonstrate to oneself, and others, that one is not irrelevant, and still has a ‘sense of purpose.’ In other words, respect is a form of ‘masculine capital’ (de Visser & McDonnell, 2013).

The relative privilege of participants should be acknowledged. As members of the professional class, it might be argued that expertise and proficiency in the use of technologies are particularly important – and more accessible. The ability of some of the men to be able to keep up with technology might be considered in light of educational and professional opportunities they have been privileged to enjoy across their lifespan. Thus, the importance of respect for these men might be considered in conjunction with the social positions they have been able to occupy. This makes the accrual of masculine capital for these men in older age relatively easier. Men who have not had the same educational or career advancement opportunities – or have experienced significant disruptions to their physical abilities – may be compromised their ability to meet these standards.

### ***The ‘Grumpy Old Man’***

The lack of respect constructed by Max, above, concerns the ways in which society begins to value older men less as their ability to provide, demonstrate usefulness, or maintain physical activity declines. A related theme is that of the curmudgeonly, solitary, ‘grumpy old man.’ Some participants drew on this theme; and their talk is informative in delineating what gives rise to frustration or ‘grumpiness’ in older age. As will be seen, these are relatively specific to older people and, in some instances, older men:

*You sort of look, back, at (1) situations and god you can see the cycles why are people doing this? Why (chuckles) it was done, yeah (...) you get a helicopter view of (...) I don’t know whether you get more tolerant of things, I get frustrated with {laughter}*

*Sam: {laughter} ha, yeah so maybe less tolerant*

*Steven: grumpy old man*

*Sam: yeah well that’s a stereotype isn’t it?*

*Steven: my god, it’s not wrong (...) it’s a funny sort of, why are these damn pedestrians walking slow? Why the hell are they still on their smartphones? (1) my god (chuckles) (2) no, why don’t you actually talk to somebody as opposed to, I love it, in the store you got one person inside, and one person outside, and they’re both on their, phones talking to one another (68).*

Steven recognises the stereotype of the ‘grumpy old man’ and accepts that it is “not wrong.” He also recognises its opposite: tolerance. Each is constructed as a potential consequence of the “helicopter view” of life enabled by age and experience. While a ‘helicopter view’ implies ‘rising above’ and transcendence of the frustrations of life, Steven ultimately endorses frustration in this binary. He draws on a range of anecdotal and (semi) ironic situations, including “damn pedestrians” walking slowly, and people overusing their smartphones. The former implies impatience; the latter appears frustrating for stymying face-to-face interaction (i.e., “why don’t you actually talk to someone”). Max, below, also constructs a binary of acceptance vs bitterness in his talk of a ‘crossroads’:

*I think, aging as a man, as I was saying before (2) questions arise, about the true meaning of life, what you’re doing here on the planet (2) and, in a way, there’s a bit of a crossroads, where you can become (2) bitter, and twisted, and so you do get older men who become, bitter, angry (1) critical (1) judgemental (1) in a fairly negative, state of consciousness,*



*which is then reinforced by excessive drinking (1) so they're getting that, accumulative, depressive effect of alcohol (1) um (1) and their body being less able to metabolise it (1) so you get, going to (...) various pubs, or the RSA or something, and you'll get these kind of bitter (1) judgemental (1) old men (1) or, I think you address, those, spiritual questions about who you are, and what you're doing, and the decisions you've made in your life and their consequences, and you become more peaceful, and contented, and, less concerned about yourself and better able to serve others (1) so I think that's a bit of a crossroads (1) appears (...) I think retirement can be, a time (2) I think a health crisis, is another one (1) or (1) a major, upset in terms of, divorce or, death of a spouse (1) and so I think (2) yeah, it's almost like it's, binary thing, you take this one path, and you become a bitter, and twisted old man, continually reinforcing it with other bitter and twisted old men (1) and who are, drinking regularly and excessively and accumulating the toxic effect, of diminished alcohol metabolism (1) yeah, so that's like one pathway (1) and, the other pathway is to come to terms with things, and become more accepting, and less judgemental, more humble, and more of service and more, kind of, spiritually at peace, with one's lot, and (3) I s'pose when you think about it, where's the coaching in this, you know? Who's helping men, navigate, that terrain, you know? (Max, 73).*

The metaphor of a 'crossroads' constructs choice between either 'bitterness' or 'peace' following financial, health, bereavement, or other crises. Additionally, a lifetime of drinking alcohol predisposes one to take the path to eventual bitterness. The end point of such a path is the "bitter and twisted old man," company for whom can be found in "various pubs." Aging is discussed as an opportunity for enhanced self-reflection (e.g., on "the meaning of life"), possibly because of an associated increase in stressors such as retirement, health difficulties, and spousal death. The path of self-reflection leads to 'coming to terms with things' – a concept similar to the 'self-integration' that defines 'successful' aging within 'agentic' formal theories of gerontology (Chapman, 2005). 'Coming to terms' is constructed with qualities of acceptance, non-judgement, humility, service, and spiritual peace. However, Max also constructs older age as a time in which one is potentially bereft of guidance. His rhetorical question regarding the lack of coaching and guidance for men suggests that men may not have the skills to cope with stressors in a way that leads them towards 'self-integration.' This suggests expectations on older people to possess 'answers.' But, as with other life stages, Max states this is not necessarily the case. Below, Xavier endorses the 'grumpiness' that comes with older age, citing biological factors amongst others:

*The grumpiness is true you know, I think it's hormonal as much as anything else you know I don't know whether, physiologically it's true but, I mean men are adjusting to, I mean I could, I've sort of had major surgery which has battered my insides quite a lot um, it's one of the reasons I decided to, go early (Xavier, 67).*

As can be seen, Xavier relates the grumpiness to hormonal changes in older age. This is a physiological construction rather than a social one. However, similar to Max, above, he also constructs physical pain (i.e. 'battered insides' in response to surgery) and health challenges as leading to grumpiness in older age. Below, Reginald constructs impatience as part of aging:

*I find, watching TV programmes, they go too slow (...) there was one we were watching last night (...) it's a, continuing serial thing (2) but it doesn't move fast enough, but when I read a book (...) I'm interested in the conversation, I'm not interested in if the house is surrounded by flowers or any description, I just want, it, to move, on (1) and I've found as I've got older, it's, you know, it's whereas before I'd sit and read it all and take the words in, now I just want to get it, and I was thinking about it, just the, as I was lying in bed this morning, is that because as you're getting older, getting closer to death (2) that, you haven't got time for things, to dwell on things, that you want to get as much in as you can (1) weird (1) weird, and I don't know whether that's got much to do with masculinity or whether that's just a (2) a trait of people as you get older, you know, because there are so many things that you want to read or do (Reginald, 69).*

Reginald's impatience is related to apprehension of mortality. As he states, he wants "to get as much in as [he] can." This extends to television and books and has become stronger with age. Not wanting to "dwell on things" stands in contrast to popular themes of older age as a time for reflection and introspection. It might also suggest that 'active aging' is at least partially driven by apprehension of mortality and consequent desire to fit as much life in as possible. While Reginald's point is easily grasped, he nevertheless constructs it as 'weird;' this bemusement indicates the profundity of this age-induced change in levels of patience. Interestingly, it also resonates with Steven's frustration at pedestrians moving 'too slow.' However, he remains unsure whether this is particularly masculine, or a concern shared regardless of gender. Below, Peter relates grumpiness in older age to experience:

*And more and more towards the end of my working life [1] although [1] I really enjoyed, my job, the work that I did (1) I got more and more annoyed at the, bureaucracy of the organisation I worked for (1) and (1) their requirements for me to do things that I thought were stupid (1) so it's a great (1) liberation (...) not to do that (1) yeah I guess that was mostly yes, for my working life (1) in that working environment you've got some constraints there (1) ah, that you really can't avoid but, and things that, when I was younger, bureaucratic stupidities that would just go off my back like water off a duck's back (1) got RIGHT up my nose (...) so I became a grumpy old man*

*S: ah that's, that stereotype yeah*

*Peter: yeah, well it's very real (...) and I really, I mean I knew I was being a grumpy old man one part of me was saying Peter, this is not such a big deal (1) but I sort of, couldn't help myself (...) I'm not sure it's to do with men actually I think it's just grumpy old (69).*

The idea that older age brings an awareness of circularity and repetition – particularly within the workforce – is constructed through Peter's acknowledgement of this as an increasing source of frustration towards the end of his career. Similar to Peter's talk about the power that 'blokeish' masculinity appeared to have over him, he acknowledges the power of 'the grumpy old man' – although he questions whether it might be "just grumpy old." Despite 'knowing' he was being a grumpy old man and attempting to tell himself that "this is not such a big deal," he 'could not help himself.' Nevertheless, this grumpiness was related to the final days of Peter's working life, and the sense of frustration and circularity out of which it is built precipitated his retirement. Consequently, retirement was "liberating" as it freed him from this "restless" cycle.

This theme appears informed by a discourse of disengagement by indicating it was important – and timely - for him to disengage from his work situation, which had become intolerable because the changes no longer felt novel or worthwhile. In his suggestion that younger people are not as jaded as older workers, there is an implicit endorsement of younger workers having opportunities to fill the roles vacated by retirees. As Peter constructs it, younger people are "not bothered as much" by the restructuring that organisations go through. Hamish, below, constructs intolerance as something that comes with being older, but his talk also recognises what 'inexperience' or 'youth' can bring:

*I will, say (1) that I think and I think it is, a lot of blokes would agree, that, as we get older (1) our tolerance, gets shorter (...) but, you (1) you know like, it's being judgemental which*

*is a bad thing (1) but we all tend to do it, one way or another (1) ah, because I've met people that look, very undesirable people (1) but when you get into their head, or get into knowing them (1) there's nothing wrong with them (1) and that's because, you open yourself, well I, I feel I open myself up to, making allowances (1) and, and, I talk to young people because, and they'll talk back to me (1) and you do get a buzz out of a younger person, acknowledging ya (1) because you are conscious you're getting older, there's no doubt about it (...) I, I don't know I, I just, seem to think that it must be something that just, goes with aging (1) I'd like to be proved wrong (...) but um (1) no I don't know where this intolerance thing, I, I'm conscious of it, and I try not to (1) I, I try and back off from it (Hamish, 69).*

'Intolerance' is considered by Hamish as something that "just goes with aging." It is normalised as something "we all tend to do" and something "a lot of blokes" would agree with. This intolerance is largely constructed here as directed towards younger people, or 'people who look undesirable' - such as those who are unemployed. However, Peter rejects this 'grumpy old man' theme and attempts to "back off" from it, instead taking a critical and reflective position through awareness of the pitfalls of intolerance. As he constructs it, intolerance is based on being 'closed' off and not getting to know others (i.e. "getting inside their heads"). It provides distance from younger people by 'closing' oneself off from them. His suggestion that he gets a "buzz" from talking to younger people "because" he is getting older suggests a desire to maintain a connection with youth.

Thus, for most of the men, being able to recognise this 'grumpy old man' trope as applying to them simultaneously allowed them to gain critical distance from it. It was constructed in relation to various factors including experience, intolerance, pain and hormones. Nevertheless, although they sometimes constructed the discourse as true, they criticised its shortcomings, thereby taking up the opposite 'older and wiser' discourse simultaneously. The 'older and wiser' discourse is explored further below in the final section focussed on the benefits of aging.

### ***Challenges to Independence and Freedom***

Independence and freedom were important to participants. Various impacts of aging on freedom and independence can be seen below:

*So I've become basically a full time caregiver now, which has ah, stuffed up my life completely (...) well not stuffed it up, changed it completely (...) we were just getting into*

*overseas trips and, cruising and, caravanning and all that sort of thing and, and um, enjoying our retirement and um, she had this damn stroke which means, she can't do any of those things anymore (...) and ah, nor can I, really (Zane, 73).*

As seen here, Zane's wife's stroke has curtailed the couple's freedom, agency, and independence; or their ability to participate in the 'third age.' With regard to the latter, Zane's wife has become completely dependent on others – and caregiving is “basically ... full time” for Zane. Consequently, he no longer has the freedom for the activities he was looking forward to. This reveals how the ‘shocks’ that frequently accompany aging can be felt by relatively healthy spouses who, by necessity, become caregivers. Although initially stating that it has “stuffed up his life completely” he distances himself from this position through a less emotive descriptor: “changed.” Nevertheless, his frustration is evident in his description of his wife's ‘damn stroke.’ Leonard has also had his freedom impacted by illness, in the form of Parkinson's:

*Well, the difference between ten and twenty years ago is (3) well, I'm not ah (3) I don't have the choice, I don't have the choices that I used to have as I said before (1) you know, if I decided I, just go, just go for a drive or...now, I have to wait for \_\_\_\_ (1) and she works part time four days a week. And I have to work around that and ah, and if I'm doing a job, you know at the moment I'm renovating a table, a dining table and I need something, I have to wait until she comes home (...) a little bit of annoyance, at it, but it's part of the price I'm paying, for having Parkinson's (Leonard, 70).*

Parkinson's has restricted Leonard's choice. He is no longer as mobile as he once was; he is unable to go for a drive whenever he wants and has become dependent to some degree on his wife in carrying out his own projects. He downplays his frustration through the litotes: ‘a little bit of annoyance.’ This may belie a distinctly A/NZ, and masculine, approach to minimising one's difficulties and suggests the importance of not complaining. It also has resonance with two themes explored earlier: masculinity as constraining personal disclosure and the expression of emotion. These may also work to prompt him to modify his language (i.e., to “changed” his life). Below, Patrick constructs the freedom that retirement has brought as enjoyable, but anticipates an end to this freedom:

*I, watch a lot of sport on TV which I, ah, is (2) one of my relaxations I guess (1) whether I'm, going to be able to do that when the wife retires we'll have to wait and see  
S: {laughter} have you got two TVs?*

*Patrick: yeah, we have, but only one's on Sky, so, I get to use that one, because, all the sport's on Sky (...) she, objects, particularly when it's cold during winter going up and watching the one upstairs, so (1) we have a bit of a scrap for the TV each night (...) it is a big worry if I'm perfectly honest (1) um, because, for five years now I've had, this place to myself all day and then, suddenly, with the wife to come, she (1) um, is quite a, almost (1) it's probably a bit strong to call her a control freak but, she likes to dictate, you know, what everyone does (1) and um, so I'm not looking forward to that to be honest (...) so that's a little bit of a concern but we'll adapt to that and um, I'm sure we'll get through (70).*

Patrick retired before his wife and has enjoyed the freedom of being able to watch whatever he wants on television, whenever he wants. It is with some trepidation, therefore, that he anticipates his wife's retirement. He takes a position akin to the 'henpecked husband' stereotype. This is achieved through the phrase "it's probably a bit strong to call her a control freak" which nevertheless serves to label her as such; as does the reference to her as dictatorial (i.e. "she likes to dictate"). These terms construct concern related to potential restrictions on his freedom. This talk also reveals the strain that may be placed on relationships in retirement, where both partners find themselves in each other's presence to a greater extent than before. Patrick reveals that aging can bring change related to household dynamics. Nevertheless, there is a minimisation of this potential 'problem' through the phrase "a little bit of concern" and a self-assurance that "we'll get through it." The importance of independence and freedom – and the challenges that aging brings to these, can be seen in anxiety about retirement homes, as seen in the talk of Zane below:

*Well your health becomes your full priority (...) when you retire you just want to be healthy, you don't want to end up in a bloody home (...) the last thing you want (...) you see those people in those homes and you think, oh my god (1) why are they keeping them alive {laughing} (...) bring on euthanasia I say (...) yeah and, they get to the stage in the hospital wings that they're just (2) vegetables (...) they don't talk they don't, they've gotta be fed they've gotta be changed they've gotta have everything done for them, and a lot of them are just, in their bed all day (2) and I think, oh, I don't wanna be like that (...) but, I s'pose you change your attitude I mean (2) you sort of, grow into these things unfortunately (...) you and I are thinking, oh shit, I don't wanna be like that (Zane, 73).*

Here we see the importance of health to freedom and independence. Health becomes one's "full priority" because, without it, one loses one's freedom and independence. Anxiety about the 'abjection' (Gilleard & Higgs, 2011) of the fourth age is reflected in Zane's account of the retirement home, where the residents have become 'vegetables.' The rejection of this abjection is evident in Zane's endorsement of euthanasia. Nevertheless, a sense of resignation or inevitability appears to imbue Zane's talk here in his assertion that "you grow into these things unfortunately" and acceptance that he may have to "change [his] attitude" towards aged care.

### ***Uncertainty***

Various forms of uncertainty emerged in relation to the challenges that aging brings. This uncertainty related to complex considerations of life expectancy, health concerns, and leisure. Xavier constructs financial uncertainty as tied to one's inability to cope with potential major events:

*It sometimes, concerns me that, the money I've got now, that's it, pretty much (1) there's no, short of lotto there's no, magic, I mean the little bit I got after my parents died that's sort of, that's spoken for (...) the economics, and this is something we're actually finding around here not so much with us at the moment because it's, it's only just started but, um, people who retired, twenty years ago, in a house that might have been worth two hundred thousand dollars, are now dealing with paying rates on a house that's worth two and a half million dollars (1) um, and, the, the fact that, there's all sorts of stuff you don't have control over anymore I mean, I suppose I could go back to work if I needed (...) you know, as a full time sort of, employee again, ah it's not something I, I mean I might find it actually quite hard to do to find somebody who'd employ me, um, the economic side of it, there's always a twinge in the back of your mind about that (...) it's not something that I, dwell on, very much but it's, always in the back of your mind that you may have to deal with something (...) it's not so much the events or the fear of, the events it's just that you might be, you're not as well equipped to deal with them as you were when you were younger (Xavier, 67).*

Xavier here relates financial uncertainty to control. Older age has confronted him with the reality that there is no new income, and the money he has now is "pretty much it." This is concerning due to the challenges aging brings, coupled with reduced ability to cope as a result of aging. Not coping is related to the inability to exercise control in the assertion that "you're

not as well equipped to deal with them as you were when you were younger.” He cites the increase in land value as an unanticipated factor for many older people. Moreover, his anticipated difficulty finding employment again as an older person in an emergency presents a “twinge in the back of his mind.” This speaks to the loss of identity, worth, and usefulness that can come with retirement or redundancy. One has less capacity to provide for oneself, let alone others. Liam’s talk, below, suggests that uncertainty might be felt more by those who have never had to struggle with finances:

*Well you don’t know how long you’re going to live that’s right, so you don’t know how much (...) and you, you’ve got to be, as careful as, as, I s’pose if you’ve got a hundred thousand you’ve, lived well all your life and you expect to, keep living that way but, we’ve never had a lot of money so, we’ve always (...) you know we, we haven’t gone on, on trips overseas and those we’ve never had but, um, and um (1) what you haven’t had you don’t miss I don’t think (Liam, 78).*

Because financial uncertainty has been a feature of Liam’s working life, he constructs a position that is less concerned about retirement savings than others. Liam has had a lifetime of ‘getting by’ and intends to live modestly in retirement. This suggests that financial uncertainty may be felt most keenly by those men who have always had a relative degree of financial security.

Impending mortality also emerged as an ‘existential’ challenge that becomes more acute with age. Uncertainty from not knowing when death might occur is conflictual with an awareness of death as one thing in life that *is* certain. This is evident in participants switching between themes of denial and acceptance. Below, Charles constructs the ‘inevitability’ of death, and the importance of getting one’s affairs in order:

*Ah, you do inevitably become aware, I mean, I don’t think I’m in imminent (1) danger of dropping dead but you do start, bearing things in mind (...) you’ve got to start divesting yourself of things and just, you know sort of setting your affairs in order against the inevitable day which I don’t think’s particularly imminent but um (...) no, you are aware of that more naturally of course when you’re young you’re sort of, bulletproof and you don’t, these things don’t affect you (1) but they do inevitably start to do so and sort of things like, parents dying and things like that (Charles, 70).*



Although he repeats that he is not in “imminent danger of dropping dead”, death has become more salient for Charles. The ‘divestment’ of material possessions appears to be a response to this inevitability of death, but also might heighten its reality. He delineates a distinction between youth and older age, with the former defined by the notion of being ‘bulletproof.’ The lifespan is considered as a course of increasing awareness of death; one begins to become more aware of mortality as one’s parents die, for instance. By older age, this awareness has become acute. Below, Xavier expands on this theme:

*It’s just a slight fear of the unknown because, I mean death has become sort of the pornography of the 21<sup>st</sup> century, you know we don’t like to talk about it we don’t think about it we don’t experience it, um, very often (...) and it, and it sort of, there’s, I don’t know whether it’s sort of an evolutionary thing to keep us bloody working, um, but, when you’re younger you don’t, this doesn’t, it seems like miles away you know it seems like, it’s forever (...) I’ll deal with it when it turns up (...) by your mid-sixties, it could be, I mean there’s a number of my friends who have died, the same age as me you know, um, unexpectedly all of them, you know it does become (...) I mean I’m not dwelling on it (Xavier, 67).*

Concern about death here is related as a “light fear of the unknown”, thereby constructing, once again, uncertainty as a theme. The phrase: “light fear” works to simultaneously construct it as scary and not-scary; it suggests an underlying unease. This is extended in the analogy to ‘pornography’, which constructs death as a ‘taboo’ topic; often thought about but rarely discussed in Western societies. Moreover, his comparison to how death is constructed in youth as “miles away” shows that increasing proximity to mortality is a major concern related to aging – similar to Charles’ talk, above. Nevertheless, he furthers the sense of ‘lightness’ in relation to mortality through minimising it as something he is not ‘dwelling on.’ This may be due to the anxiety that might ensue from considering it *too* much. The notion of ‘not dwelling’ on death is furthered through his assertion that he will “deal with it when it turns up.” Thus, there seems to be a balance struck in this talk between acknowledging the reality of mortality, while not becoming mired in thoughts about it.

Xavier’s talk also shows that the reality of death is exacerbated by seeing one’s age-related peers die. As another participant (William) put it, “I go to a hell of a lot more funerals now.” Older age, therefore, is a time in which the profile of death is raised through its visibility and ubiquity. It becomes impossible to ignore - as much as some tried to not dwell on it. This

balancing act - of acknowledging death while denying it - is constructed in the talk of Reginald, below:

*Well, yeah (2) my fear of death, is, (2) what I've tended, and I always have done, is I start saying something like that and then I think of something and I (1) my mind goes all over the place (1) but, if you look at a thing like suicide, there's no way I'd ever commit suicide (...) because I'm too selfish to commit suicide because, if I committed suicide (1) I wouldn't get to see my grandkids at the cross country, I wouldn't get, to, do these things so why would I, commit suicide? (1) so, that's the thing with death (...) so, as you know, getting older there are those thoughts (2) um, death doesn't scare me (2) it annoys me (...) because, you know (1) it'll stop me doing what I want to be doing, yeah (...) so um (1) yeah, it's (2) yeah, we don't (1) I haven't g...I haven't given it a lot of thought (2) to being dead um (2) and ah (1) I don't plan to either (laughing) (Reginald, 69).*

Reginald's attempt to reconcile fear with the inevitability of mortality is reflected in his admission that his "mind goes all over the place" when thinking about it. Reginald chooses to discuss death using suicide as an example; this is telling because one has relative control over suicide. His construction of suicide as something "he would never do" reveals the extent to which he rejects the uncertainty of death and is a strong way of illustrating his attachment to life's pleasures, such as his "grandkids at the cross country." Although not elaborated on, one might surmise that "the thing with death" is that it robs one of the *choice* to participate in life; it 'steals those moments away;' one cannot choose to be "selfish." Through considering death in relation to suicide, he repositions himself, not as fearful of death, but "annoyed" at it for "[stopping] him from doing all the things he wants to do." Thus, rather than death per se, it is the loss of life that concerns Reginald here – a subtle but important distinction. Consequently, Reginald finishes this extract by positioning himself as avoidant of death or thoughts about it. The love of life vs fear of death distinction can be seen in contrast with Les' talk, below, which discusses the possible 'suffering' that might accompany it:

*With advancing years (1) um, I think it's probably natural, um, to think about your life that's slipping away (1) ah, and um, when you get to 90 years of age as I am (1) you think, will I make 95? (1) ah (1) it is a (1) a great uncertainty (1) and um, it would be, naïve of me to suggest that, you know (1) well, you've got to go some time, therefore, you've got to accept it but it, it is, of some concern (1) you wonder, how will you end your days? (1) will you, slip*

*away quietly in, in your sleep? Or will you um, be suffering (1) ah, long term, in a, in a hospital bed or something like that (1) ah it really doesn't, it's something which you never think of, when you're in your thirties and forties (1) ah, but when you get to ninety, it's something which does weigh a bit heavy on your mind (Les, 90).*

For Les, at age 90, death is a “great uncertainty” that “weighs a bit heavy on [his] mind,” and life is “slipping away.” This is a stronger, less equivocal, use of language than seen in the talk of other participants, above, who use terms such as ‘concern’, and ‘annoyance.’ And, although they acknowledged aspects of mortality, most asserted that they were not ‘dwelling’ on it or thinking too much about it. The difference in how these participants discussed death might reflect its relative prescience for each participant. Charles, who is younger, does not consider it ‘imminent,’ for example. However, Les muses over whether, at age 90, he will “make it to 95.” It is also reflected in the specificity he has given to consideration of his own death. To paraphrase his question, ‘will you slip away quietly in your sleep or be suffering long term in a hospital bed?’ The uncertainty of death is further taken up in the talk of Peter, below:

*I guess the, the health thing I, I'm vaguely aware of what a lottery health is (1) just every now and again somebody you know gets a little lightning strike that (1) there's a, brain tumour diagnosis or, multiple sclerosis diagnosis my wife recently has, been diagnosed with Parkinson's disease and, and so, {laughing} you can feel the dice shaking all the time (1) because the, the next day you could, something like that could happen so I've become quite conscious of that but (1) that has a, positive side in a way (1) because it's *carpe diem* (1) isn't it? (...) yep (1) don't put it off! (1) enjoy it, yeah (...) when you're younger you don't think about that sort of stuff at all (1) I mean it's a big shock if somebody you know happens to (1) die of cancer or, but it's so rare, at your age, that you don't (1) internalise it whereas at my age {laughing} it isn't rare, at all (...) Peter: whatever way the dice are going to roll they're going to roll (1) there's nothing you can do about it (1) it's not a major preoccupation but every time it happens I think oh, it could have been me! Could have been me (Peter, 69).*

The extended metaphor of gambling, and the uncertainty it carries, is constructed by Peter here through the allusion to a “lottery”, and the image of “dice rolling.” As with other talk, the visibility of death that older age brings is also apparent. In conjunction with the gambling imagery, this works to convey the ‘odds’ of death as becoming shorter. The shortening odds can be seen, once again, in the comparison to younger life, where death was a

rare occurrence. Nevertheless, Peter reframes the increasing prescience of death in a positive way through the phrase *carpe diem*, which encourages him to not “put it off!” This is similar to the way in which Reginald discussed death – as encouraging appreciation of life. For some participants, such as Bryce, below, consideration of the potential for pain leads to thoughts of ways to avoid it:

*What purpose can be served by, allowing somebody to live in pain for, months, or years, it's an outrage (1) yeah so you're thinking about that as you get older, I suppose (...) in spite of my complaint about my knees and things I'm in, pretty good health but, you know, it won't, be forever (1) so I have thought about well, what way will I choose, there's got to be a way (1) ah (1) so I've thought of one or two (laughing) when the time comes, if I've got the courage to do it (Bryce, 66)*

Although other men have discussed uncertainty in relation to mortality, Bryce appears in this talk to be reasonably confident that he “will” choose to end his own life “when the time comes.” He knows that his current “good health...won’t be forever.” Thus, similar to some other participants in this study, Bryce takes a pro-euthanasia position for its ability to remove uncertainty and suffering. Bryce’s talk is ostensibly antithetical to Reginald’s injunction against suicide; it anticipates a time when the pain that accompanies living outstrips enjoyment of life. Reginald’s talk, above, does not consider the potential pain that might accompany dying, but is rather formed as denial of death and its associations. As Reginald stated, “I haven’t given it a lot of thought to being dead...and don’t plan to either.” The main difference between these two participants, then, is that Bryce *has* thought about death, specifically “what way [he will] choose.”

### ***Changes in Sexual Practice***

While changes in sexual practice for participants do not always or necessarily constitute a ‘challenge,’ they do represent a change that was articulated as significant by some of the participants. The theme of sexuality, including intimacy and functioning, was generally framed in terms of decline or reduced interest:

*I don't want to go too much into it, because men don't but, um, the sexual activity side of life (...) um, is not as active as it used to be (...) and I'm very conscious of that (1) because I have a wife who is very keen on that (...) and I'm not, quite, meeting those needs all the time*

(...) ah (1) you know I've spoken to the doctor about it, I've had um, ah, um (1) testosterone, or iron readings all that sort of stuff, um, in fact for a while the neurologist, he arranged to get me a trial on some ah, some hormone injections but, um (1) I don't think it made a lot of difference I was getting very tired (...) they found that, I had a high iron reading (...) ah, but that's not, the problem it used to be now I'm not on any medication for it but it seems to coming right I think (Hamish, 69).

Hamish reiterates a theme of masculinity as constraining personal disclosure in his admission that he does not “want to go too much into it because men don't.” Despite this, he divulges that his sexual activity has declined significantly. He admits his wife is “very keen on that [sex]” and he is “very conscious” of this because he feels unable to “meet her needs all the time.” Thus, the ability to satisfy one's partner sexually is constructed here as a masculine ideal. Although not explicitly stated, there appears to be no physiological reason for the relative lack of “activity;” hormone injections did not work, and he had a high iron reading. His discussion of functioning in relation to biology (hormone and iron levels) suggests there is nothing ‘wrong’ with him or his body. Nevertheless, the alternative – that there is something ‘wrong’ with his *interest* in sex is not discussed openly – possibly because interest in sex is a hegemonic masculine quality. His assertion that it is “coming right I think” constructs his present lack of sexual activity as temporary. The recourse to biology in discussing the ‘problem’ also suggests that it is easier to discuss sexual matters in these terms, particularly for men who “don't like talking about this stuff.” Below, Max is candid in discussing his sexual functioning:

*I've had to um, because of prostate cancer I've had to, come to terms with reduced muscle strength (...) reduced sexual functioning (...) which has been a huge, thing to come to terms with (1) I can no longer ah, naturally achieve an erection (...) can no longer ejaculate um, bizarrely, or surprisingly, I can still achieve an orgasm (...) um (2) and in some ways, they are more intense, and longer lasting orgasms (1) because I don't ejaculate I think my brain doesn't get the message, job done (...) so the orgasm, continues longer, so it's a bizarre, kind of pay off, in a way (Max, 73).*

Max has had to “come to terms with” erection dysfunction as a result of prostate cancer. Through this talk, the extent to which discussions of sexuality in older men is embodied is apparent. Much of the talk is in terms of the way the body has let men down. However, as Max constructs it, the ability to experience prolonged orgasms has provided a “pay-off” that

mitigates against the loss of erectile function. Nevertheless, there were difficult psychological effects in the initial ‘shock’ of no longer naturally achieving an erection or being able to ejaculate. These are elaborated on below, when Max is asked how he managed this:

*I don't think it's exaggerating to say that there was a grieving (1) a grieving for the loss of ah, being {laughing} able to get a good grip on oneself (...) a grieving for the loss of being able to ejaculate, um (2) and even though I've no desire to (laughing) procreate (1) you're aware that you've lost the ability to procreate (...) and that does have an impact, on, consciousness, um, and there's a kind of element of, grieving (1) knowing that life is, irreparably changed (...) and there's no going back (...) mmm, ah (2) and then there's been the, adjustments required in ah, sexual intimacy (...) and I've always kind of regarded myself as being a, a cunning linguist {laughter} (...) and ah, so um, I've always felt, capable of um, giving my partner sexual pleasure (1) independent of whether I had an erection or not (...) so I think, that has, been helpful (1) I, think it would be a lot harder for men who've been, very dependent on, um (2) penetrative sexual intimacy, um, and if they never, became adept or if they had any sort of, aversions to oral sex, then they've limited th...self-limited their, capacity (...) um (2) so that adjustment in sexual intimacy, um, loss of muscle strength, all that does have (1) have an impact on, your consciousness of yourself, and your ability to function in the world (...) I don't think we're well developed in the role of the sensitive lover (...) although, we talk a lot about sex, and joke a lot about sex, and a lot of our advertising and all that is, is (1) sexually, driven (...) I mean, women in bikinis, draped over bonnets of fast cars (...) um, so although there's, plenty of attention payed, to, sex, it's very shallow (...) and there's no real, culture of, being very skilled, as a lover, or flexible, and considerate (Max, 73).*

Max's response that there was “a grieving” of the fact that there was “no going back” speaks to the loss of a potent symbol of masculinity: the erection. This is contained in Max's quip that he was “unable to get a grip on himself.” The erect penis's symbolism relates to qualities of ‘hardness’ by which masculinity has been defined in opposition to femininity's ‘softness.’ Moreover, Max grieved for his lost ability to procreate despite the fact that his desire to sire more children – in a practical sense – has waned. Yet, it persists as an important, and symbolic, potential. It is possible that this potential speaks to powerful hegemonic masculine ideals related to procreation. Indeed, the ability to procreate seems to be the one aspect of this physical setback that Max cannot mitigate against.

However, like Hamish, Max constructed pleasuring one's partner as an important component of masculinity. This he has been able to achieve through cunnilingus. Max positions himself in opposition to dominant constructions of heterosexual sex as "dependent on penetrative sex" and, consequently, as "shallow." This 'ideal' of penetration in heterosexual relations has been critiqued by Schippers (2007) as lying at the heart of gendered power relations. This 'shallowness' Max constructs pervaded other talk of 'blokeish' masculinity related to conversations with other men, and emotional containment (see 'barriers to personal disclosure' and 'stiff upper lip,' above). In his opposition to limited, purely penetrative sexual performance, Max constructs the position of a caring, sensitive, and skilled lover. In this way the 'hegemonic' ideal of hardness is replaced by 'hegemonic' masculine qualities related to pleasuring women. To use the parlance of masculine capital, it also suggests that capital can be accrued in this way to compensate for dysfunction in other areas. Similar to what Oliffe (2005) found with men who have lost their erectile functioning due to prostatectomies, Max's talk suggests that men can, and sometimes do, find other ways to meet masculine imperatives or desires related to sex. Below, Ewan also constructs a decline in sexual functioning, but rather than frame it as reduced ability, he considers it in terms of reduced interest:

*There was one time, a few years ago I was having sex (...) and, something, I'll use the word popped but I don't know if it's the right one, in my chest and I felt woah (...) as I say I've got ischemic heart disease so, the, recognition of that is there, yeah why would I want to, strenuously pursue sex when I could be damaging my heart, I suppose that's gotta be there (...) to some degree but, for the main part I think I've been suspicious of sex all my life I think (1) because, of all the, drama that it's caused me (1) it's wonderful, but, you know, in one instance I almost lost my son (1) and, in another a woman deliberately got pregnant (...) and (1) and once, yeah and that's about power, and of course, a woman holds a lot of power in that regard, especially if the man is particularly drawn to her, because she's beautiful or, or whatever (...) at the end of the day (2) sex hasn't been a big, it was when I was younger (...) big driving force but, I'm still capable I'm not, I'm not, um, I'm not sterile I'm not, what's the other word they use? (...) impotent (1) I'm not impotent (1) I just I, I made a choice, and I don't want to complicate my life anymore by, that aspect of it (...) but you know, that energy that's going on with um, wanting to have sex with somebody, shit it clouds everything (...) and, and so, in that respect as well (1) um, sex never did me any favours it just made me, um, see askew I suppose (Ewan, 70).*

Ewan discusses the way his body has let him down in relation to sex, but through his “heart” rather than genitalia. One of the main reasons he no longer wants to have sex is because, several years ago, he experienced heart trouble while having sex (his heart “popped”). This shows the ways in which physical health can impact one’s sexual practice in older life. In addition to heart concerns, Ewan’s loss of enthusiasm for sex as he has aged is also related to the ‘drama’ that having sex has caused for him in the past, and the “energy” that goes into having a sexual relationship with someone. This talk is informative for the ways in which it constructs power as permeating sexual relations. As he states, “a woman holds a lot of power” with regard to sex. He draws on Fromm’s psychodynamic theory in constructing the symbolic status of women as supplying himself, and other men, with a form of status. This account is also commensurate with Butler’s (1993) argument that women give the phallus its power through representing its ‘lack.’ But this desire for women as a form of status places men at a disadvantage; as Ewan constructs it, he becomes prone to manipulation: he “almost lost his son” and a “woman deliberately got pregnant”.

However, Ewan is quick to assert that he is “not impotent” (i.e., powerless). He has not ‘lost’ his masculinity in this way, so his reduced interest is not due to reduced libido. In *choosing* to not have sex anymore, he has exercised control over his own desires. His constructed desire for friendship rather than sex also demonstrates the ways in which relations between men and women might change in older age.

Similarly, Selwyn constructs his lack of sexual activity as a lack of interest or desire, rather than a lack of ‘ability’:

*So that’s the highlight of your life now, watching others do things that you’d like to do*

*Sam: sure (1) do you ever feel a tinge of, longing or*

*Selwyn: oh no not really, no, no, no, I mean (1) it’s the same with sexual feelings and things like that, they just sort of fade away, and um, I’d much rather have a cuddle now than have sex {chuckling} (...) no, um, sex becomes too much like hard work (...) especially if you’ve got a crook back or something {laughter}*

*Sam: and you don’t lament that sort of loss?*

*Selwyn: no, not at all I mean, I probably as a young guy was very sexually (1) what’s the word um (2) you know um (4) I felt I should have sex at least twice a week sort of thing (...) and now (1) sex has got no part in our lives at all (...) basically, um (1) [and it doesn’t worry me in the least (...) I mean it’s, something that was there like reffing was there, and now it’s not (...) rugby was there once upon a time, now it’s not, it’s just something you watch on TV*



*(...) so I don't mind watching sex on TV (laughing) as long as I don't have to get up and use any energy (70).*

Selwyn accepts the fact that sex has “faded away” to become less of a feature of his life. Sex is constructed as “too much like hard work” and he no longer has the “energy” or desire for it. However, he reveals his younger life as sexually voracious, and it is through this assertion, perhaps, that he meets hegemonic ideals of sexual activity. Sex is equated with other activities he no longer participates in, such as rugby. However, a sense of continuity is maintained through watching these things on television (including sex). In this way, Selwyn constructs a theme of disengagement in relation to sexual activity and sport.

### ***Loneliness and Social Isolation***

Loneliness has been identified as a significant factor for older people related to purpose of life, mental health (Neville et al., 2018) and satisfaction with social networks (Kemperman et al., 2019). The participants' talk, below, extends this. For some men, loneliness and solitariness was constructed as belonging to older age:

*S: what's your social life like? (...)*

*Les: well (1) it's, it's not great and that's ah, largely my own making I suppose (...) we ah, belong to St John's church (...) and um (1) we attend reasonably regularly, ah, they have a little from time to time, ah (...) monthly. Lunches which we go to (...) um, I used to ah (1) get, really fired up about freemasonry (...) ah, and I belonged to, several different organisations associated with them but, I've largely given those up now (...) um (4) my wife (1) um, as I said, hasn't ah, kept (1) physically as she used to be (1) so, I don't like being out at night (...) and leaving her (1) so, there's only a couple of, couple of nights a month, where I might be out (90).*

Here, Les admits that his social life is “not great” but discusses this in a lightly self-recriminating way, as “largely [his] own making.” He has “given up” many of the social activities he once engaged in related to freemasonry. But, although he ‘blames’ himself for not being as active as he was, Les' talk also reveals how his social activity has been impacted by the need to care for his wife. Thus, his talk shows how taking up a caregiver role in older age can necessitate sacrifices in social activity. This has emerged in talk elsewhere, particularly in Zane's talk about how his wife's stroke has impacted freedom and independence. Below, Anthony discusses the impact of living by himself on his loneliness:

*Oh, I think the major, major difference [in being older] is, just being, by yourself (...) um, I was never (1) by myself for any length of time (1) until, you know my wife died last year (1) there was always ah, school, family, work, ah, friends etcetera etcetera (...) and now (1) ah, you know you, wake up every morning (1) in an environment that's (1) by yourself [...] if you were in a retirement home (1) then, it's a little bit different because you know next door, there's somebody, exactly the same as you are (...) whereas here that's not the case (1) and you don't get to know, your neighbours here (...) like you would in a retirement village, so they, in some ways (1) have their attractions (...) but they also ah (3) it's not necessarily a reduction in masculinity, it's a (1) reduction in your individuality, your ability to do things by yourself (...) ah, you know (2) you notice it but ah (1) you get, ah, most days there is, something happening or someone arriving or someone coming and going and ah (1) you see and do (1) and there's always friends out there if ya (1) if you want to give them a call and say hey, what are you up to? (...) but even that is ah, is very temporary (1) you know lunch, dinner, a cup of coffee sort of thing (...) but you know, there, you're going to come back to an empty house*

*S: yeah (1) so, would you say that at times you feel lonely? (...)*

*Anthony: yeah, I think there are times, where I feel lonely (...) as I said it's, I (1) could quite comfortably get through the day, time (...) but it's still one of those things you know, when you are, in here, by yourself (72).*

Unlike Les, above, there are no restrictions on Anthony's social activity – he is not physically incapacitated and does not have to care for a wife or partner. As he asserts, “there's always friends out there if you want to give them a call” and “most days” include some form of social interaction. Nevertheless, it is the constancy of companionship which has ‘changed’ for Anthony since his wife died. As he reveals, he was “never by himself for any length of time” as there was always school, family, work, and so on – the everyday activities involved in work and family life. Thus, although he constructs it as a ‘change’, there is an inference that this has been challenging and a of positioning himself as lonely. Despite still seeing friends occasionally, he always “come[s] back to an empty house.” However, his loneliness is not enough for him seek out retirement homes. Thus, independence and individuality here come at the expense of loneliness. These have been discussed above as values that the men almost invariably constructed. Although he “would get to know his neighbours” in a retirement home, the constructed reduction in “individuality” that this would entail prevents him from leaving

his own dwelling. A theme of loneliness pervades the talk of Tristan below. Like Anthony, he constructs it in relation to his wife's death.

*Sam: do you feel life's, gotten better in, in (1) any ways as you've gotten older? (1) it's improved or?*

*Tristan: no (1) not since my wife died (...) it's, a maintenance programme now {laughter}{...} I think ah (2) these (groups) keeps me, pretty steadily, pretty steady (...) I'm probably, active in (1) one (1) two, three, four (1) five (1) at least five organisations, six (...) and (2) well (1) so that, ah (1) keeps me, pretty much, ah (1) I do a lot of work on the computer (84).*

Tristan's metaphor of being on a "maintenance programme" paints his life, since his wife died, as lacking in opportunities for growth and 'progress.' Although 'active' in several different groups, these are considered as keeping him "steady" – in an extension to the 'maintenance' metaphor. This talk shows the impact that losing a spouse can have on one's life in older age; despite the continuance of social activity, it is likely that the constant companionship discussed by Anthony is what is missed. Below, Tristan expands on the impact of his wife's death and the other social supports he has available:

*[Discussing his wife's death] oh yeah (1) my family were very supportive (...) the ah, social supports were largely from my family*

*Sam: right (2) and, since that time, it's been seven years (1) um, are you socially, active and, I mean you're involved with grey power obviously, so*

*Tristan: oh yeah and (1) quite a few organisations but, really I suppose now I (1) meet very few friends (...) because ah (1) they're all {laughing} I keep on attending funerals (...) yeah, um (1) and ah (3) I'm probably not a, ah extremely social person (...) now (1) um (1) I've got membership at a couple of, um (1) clubs, ah, the \_\_\_\_\_ club and the \_\_\_\_\_ club but, I really don't go along to them (84).*

When his wife died, the social supports were largely from his family, but Tristan considers he has few friends outside this. And, despite involvement with "quite a few organisations," there is a sense of loneliness and disengagement. He does not "go along" to his clubs and he "meets very few friends." Similar to the talk in relation to mortality, he considers this as due to the fact that he "keep(s) on attending funerals." Although he does not finish his sentence, his implication is that his friends are "all" dying. Moreover, Tristan's position as not

an “extremely social person” shows how personality might influence the levels of social interaction in older age. It may also be that ‘sociability’ – or lack thereof - is related to masculinity. This possibility is explored in the talk of Xavier, below:

*I think it may be more difficult to ask for help also I think men (I) possibly are more socially isolated than women in, you know, in some cases often women are sort of, close to home and set up networks of friends and, and um contacts within the area they live in whereas men often are, their contacts are often work related and they lose those when they retire (Xavier, 67).*

The impact of spousal death might be more likely to result in loneliness for older men because, as Xavier asserts, men are generally more socially isolated than women in older age. His assertion that men may be less likely to ask for help again has resonance with talk, presented earlier, that constructed the masculine imperative to maintain a ‘stiff upper lip’ and not express vulnerability. Thus, it could be that reluctance to personally disclose information, or to contain emotions, has an impact on men’s levels of sociability. Despite the difficulties in making friends or having social contact, Hamish’s talk, below, suggests that the need or desire for such contact may be strong for men in older age:

*I think the biggest thing is, for me, is, the contact of other people (...) that’s where the vacuum is, that’s the part, that I miss (I) but, yes, um, I used to say when I was at work and ah, talking to patients and that that, we’re all on a conveyor belt (...) th...that’s how I see life (...) just, where we are on that belt, I don’t know (...) where the end of it is we don’t know, it could be tomorrow, it could be ten years away or whatever (I) but we’re on a conveyor belt (I) and we’re moving along through the stages, and I’m aware of that (Hamish, 69).*

For Hamish the importance of the “contact of other people” is expressed through it being “the biggest thing” for him. The notion of a vacuum is used to describe the void in the contact of other people that results from retirement. His example taken from work is important here, as it suggests that work provided contact with other people. When men no longer work, they must find new ways of connecting with others. Although it is unclear how his conveyor belt metaphor relates to loneliness, it may be that it takes one away from others in older age – and there is a risk of loneliness in this.

## *The Challenges of Declining Health and Physicality*

Health emerged as an uncertainty for older men that was associated with a number of interrelated discourses – such as financial uncertainty. Increases in medical expenses add to the uncertainty regarding both money and mortality:

*And, your main bill these days is for health, your bloody life revolves around going to the doctor, every two or three weeks (1) getting your blood pressure checked and your, heart checked, and you knee replaced and, {chuckling} your hip replaced {laughing} your, prostate's stuffed up, everything can go wrong when you get older (...) bodies aren't designed to live to ninety (...) they're only designed to get to about sixty and then they all start falling apart (1) you see these people who get to a hundred and they're still, fit, and they're driving a car, they're a BLOODY MIRACLE (Zane, 73).*

The sense of change in relation to health matters in older age is reflected in this talk. For Zane, health care comprises the “main bill” and is thus one of the most profound impacts of aging. His use of a biological discourse of senescence – the body “falling apart” - serves to illustrate his construction of older age as a time when health matters preoccupy one's life. Zane continues below, in talk focussed on the effects of aging on a valued masculine performance:

*Your rates and maintenance, and heating and electricity and, you're probably going to have to hire someone to help with the garden and the painting and, all of the stuff you used to do yourself (...) I mean I used to do all our home decorating and painting and (1) paint the roof and things (...) I can't do that anymore (Zane, 73).*

Declining health is here constructed as problematic and challenging due to reduced capacity to carry out DIY work. It was suggested earlier that the importance of DIY to A/NZ men lay in its ability to demonstrate skill, independence, and self-sufficiency. Here, DIY is further constructed as a means of reducing cost by reducing reliance on contractors. Thus, a consequence of not being able to carry out DIY is an increase in outgoings. Thus, in addition to healthcare being the main bill, health problems also cause financial strain through this more indirect route. Below, Joseph discusses the burden of age-related health care, while constructing a discourse of defiance:

*Well, old age ain't for sissies (...) because, um, you know so many of them are in wheel chairs or (1) got cancer or (1) or got something or other (1) so it's not for sissies (1) I've, had a good spell so my wife's lost her sight so I, have to, I'm learning new domestic skills which I've never learnt, had before I quite enjoy it, this afternoon I made some soup in the pressure cooker (Joseph, 91).*

Joseph's comment that "old age ain't for sissies" constructs older age as tough, requiring courage and strength due to the physical health concerns that arise. Moreover, he has faced the challenge of a wife whose health has deteriorated; this has required adaptation and the development of new skills in the form of cooking. The following extract, from Hamish, constructs declining health in terms of the limits it places on physical activity:

*I've done a lot of yacht racing, and I've still got my little yacht but I'm not as active on it, I've (1) I'm aware that I am aging (1) so it is, the brain does realise that (1) getting in and out of a dinghy, things, simple things once, are harder now to do (1) I was saying to my wife the other week that, we go to town on the weekend (1) we, don't see the people we, used to see (1) but, there's one reason I reckon that is and that's because we're busy looking at the road in front of us so we don't trip up (1) we're watching our step more, because (1) we do, I think, and, having worked in the um \_\_\_\_\_ line, the biggest thing, from my age on, one of the biggest enemies, are falls (1) we trip, we don't lift our feet, it's, part of the metabolism, part of aging I think (1) so you, y...you know, I am aware of that (Hamish, 69).*

Hamish constructs older age as a period of declining activity; it also increases risk for falls due to changes in metabolism. 'Simple things are harder to do' for Hamish. His aging body has limited his participation in the leisure activities he once enjoyed (i.e., yachting). But it is also constructed, through the necessity to always watch one's step, as limiting his awareness of his surroundings and the possibility of seeing acquaintances; he reinforces his point based on his past work experience in healthcare. Below, Xavier constructs 'physical decrepitude' as a concern in older age:

*The worries about sort of, physical um, decrepitude I must admit is a, is a bit, concerning you know the sort of realisation I mean I'm, 67 and I'm, you know, I need to change a whole lot*

*of lifestyle habits that I've (chuckling) that I've enjoyed for quite some time, you know if I'm planning on being fully mobile at eighty, if I get to eighty (Xavier, 67).*

Older age has brought a realisation that he needs to change “a whole lot of lifestyle habits.” There is an anticipation here of future ‘decrepitude,’ and an awareness that he cannot keep the same habits that he has enjoyed for some time. This notion that one can no longer do things the same way as when younger, is also constructed by Liam:

*Yeah, that [physical strength] part's gone now {laughter} (...) I'm not bulletproof anymore (Liam, 78).*

Liam remains active through lawn-mowing and other physical work, but nevertheless recognises that he is “not bulletproof anymore.” This metaphor speaks to the hegemonic masculine qualities frequently constructed by younger males: physical strength, robustness, wholeness, and invulnerability. In older age, it appears (based on the talk of these participants) that the ‘bulletproof’ nature of youth is gradually replaced by an awareness of physical vulnerability. Selwyn exemplifies the drastic nature of the change to physical ability that is ushered in by aging.

*Aging is, it changes you completely basically almost, it\_(I) you're young, you're fit, and you're healthy and then, once you get, to your fifties, sixties, seventies, your health starts packing up (...) I've had two hip replacements, I've just had my knee replaced (...) um, my back's crook (laughter) (Selwyn, 70).*

The extremity of the change associated with aging is exemplified in Selwyn's assertion that “aging changes you completely.” Selwyn's litany of physical ailments serves to reinforce his point. Nevertheless, in contrast with the almost sudden impression of change in relation to physical decrepitude constructed by others, Selwyn's talk constructs this as a reasonably gradual process, beginning in one's 50s. Below, the impact of no longer being able to continue the sporting activities that once brought enjoyment is discussed by Tim:

*Yeah, I think that's one, little regret yeah, not being able to, to do (I) a lot more of the explosive sports things, I mean I would love to, even now if I was fit and able I'd love to be able to go back and do some veteran, mucking around, it must be in the blood or something (Tim, 72).*

As can be seen, physical deterioration is constructed as contributing to ‘regret.’ This term conveys a sense of loss or missed opportunities. As he states, “even now,” at his age, he would love to participate in “veteran mucking around” but there is no way that Tim can do this, largely due to having had heart surgery.

### ***Laziness and Disengagement***

As has already been prefaced, a discourse of ‘laziness’ was occasionally drawn on when men fell short of activity targets, or disengaged from activities they might be expected to perform:

*I think I’m starting to get lazy actually well I still go out and, do a bit of lawn mowing and things like this to um, keep me, keep me mobile and things like this (...) keeping active yeah, yeah, well I think you’ve got to use it or lose it (Liam, 78).*

Although he uses the term “lazy,” Liam still leads a reasonably active life that involves lawn mowing and other yard work in order to “keep [him] mobile”. The use of this mildly pejorative label, then, might best be considered in relation to Liam’s previous levels of activity. As he has elsewhere stated, he has always considered himself a “worker” who sometimes worked for 80 hrs a week at two jobs. Thus, the ‘laziness’ articulated here, is not only relative to an ‘active aging’ discourse, but is relative to previous functioning and, perhaps, self-expectations (influenced by the imperative to provide for family). The catchphrase “use it or lose it” also works to construct a resistance to physical decline based on an anticipation of losing the ability to be active all together. As Max elsewhere suggested in relation to impotence, there is a sense with advancing age that, once functioning is lost, there is little chance of getting it back. A mild sense of self- recrimination is also evident in the talk of Tim, below:

*Life’s a hell of a lot slower you know I’m not so, not physically active (...) probably not enough physically active (...) ah (2) I had ah, I have quite a few, little health problems that [I] aren’t, major but, you know, they’re there (...)*

*Sam: (...) not being so physically active, is that, by choice or?*

*Tim: by laziness (...) I should be doing a lot more at the moment (...) instead it’s very easy to, cook some meals and pick up my kindle and, I love reading (Tim, 72).*



Tim positions himself as 'lazy' for preferring to read books and cook dinners at the expense of physical activity. As he states, he is "probably not enough physically active," despite the health problems that might provide legitimate reason for a degree of disengagement. Through use of the word "instead," he places less impactful activities such as reading and cooking in a dichotomy against more strenuous physical activity, emphasising that he "should" be doing more of the latter. Nevertheless, the 'self-recrimination' in this instance should not be overstated. Tim 'regrets' the loss of his former physical prowess but is 'realistic' about what he can do. This indicates a degree of acceptance. "Laziness" is also constructed by Tristan, below:

*But um (1) no that's (1) part of this sad decline {laughing}(...)*

*Sam: so what are those barriers to activity for you? I mean you mentioned laziness but=*

*Tristan: =yeah {laughter}=*

*Sam: = is it, is it as (1) easy (1) is it as simple as that?*

*Tristan: yeah it's a, a, you know, a lack of um, um (2) determination (84).*

Tristan also engages in self-recrimination and attributes his lack of activity to a 'lack of determination' indicative of 'the sad decline' of aging. Thus, a discourse of disengagement is constructed, and positions Tristan negatively. Once again, laziness is constructed by Selwyn, below, but in a way that does not consider it part of overall decline:

*It's interesting to, to get older and think now, does it, so I'm less mobile (...) at the moment I'm having this real lazy spell anyway (...) um, but that's affected me*

*Sam: in what ways has it affected you?*

*Selwyn: oh, well I can't run around like I'd want to (...) I'm not as physically capable (1) as I normally would have been (1) and I think the impact of aging on that, you know (70).*

Although not as physically capable as he once was, Selwyn considers himself as going through a 'lazy spell'. The use of the term 'spell' indicates temporariness. It suggests Selwyn is resisting disengagement and there is hope of being able to "run around" again. Nevertheless, there is also acknowledgement that inability to run around as he once did is part of the aging process. Thus, a balance is struck between activity and disengagement or acceptance and denial in this talk.

In the talk above, active aging discourse occasionally appeared to set a standard the men ‘should’ be meeting despite significant setbacks. Inability to meet an active aging standard sometimes resulted in (light) self-recrimination expressed pejoratively as ‘laziness,’ despite the enjoyment that disengagement sometimes brought.

### ***Cognitive Decline***

Although physical decline was challenging, cognitive decline was perhaps the biggest concern for participants and as such, it often resulted in resistance, which is covered in the following section. Uncertainty surfaced as an apparent result of expectations about aging, the salience of others’ cognitive decline, and potentially ‘normal’ cases of forgetting:

*But I’ve never heard anybody talk about getting Alzheimer’s (...) I, I’m not sure if it’s because they don’t want to talk about it, probably it is (...) um [1] but um, the only thing you hear about is the people with Alzheimers (...) it is a concern (Tristan, 84).*

Tristan constructs Alzheimer’s as all too visible in the people it affects, but no one talks about ‘getting’ it. While this may be related to limits masculinity imposes on personal disclosure, it more likely refers to the anxiety it provokes. As with Xavier’s discussion of mortality as being similar to ‘pornography’ in western culture – a taboo subject – this talk constructs Alzheimer’s in Tim’s talk, below:

*Tim: um, so yes, you wonder about that, and especially, you do know instances when you’re fishing for a word, like, a couple of times here, and, probably, twenty years back you’d be there just like that (...) um, so, yeah, I don’t know, it’s a hard one, do you recognise it, that’s what worries me at the moment, do you recognise you’re getting fuddy duddy before the kids do, so I’ve got to get out of doing my relief teaching, or (1) but I really enjoy it (72).*

Tim here constructs a contrast between his cognitive functioning now and when he was younger. He has noticed this in the difficulties he has found with his word retrieval. But what appears to ‘worry’ Tim most, is whether he is able to self-monitor. This is important for Tim because he still carries out relief teaching. Thus, his concern is over whether he will “recognise [he’s] getting fuddy duddy before the kids do.” This leads Tim to consider disengaging; that he will “have to get out of relief teaching” even though he “really enjoy[s] it.” The ‘fuddy duddy’ euphemism is also suggestive of the level of concern that accompanies talk about

dementia. Similar to Tristan's assertion that people do not like to talk about Alzheimer's, it suggests a reluctance to call it by its name. This is explicitly discussed by Peter:

*What bothers me more is my mind doesn't work as well (...) now I'm not, sure what's going on there (...) um, I, I read somewhere recently that a lot of [1] that as you get older, you don't sleep as well and that's certainly the case (...) and a lot of, of, um [3] poor cognition [1] can result from that (...) so, there are, and there are certainly some days, when, 'cause I do, I still do a little bit of, private research in the area that I used to work in, and there are some days my brain just doesn't work (...) and, so whether that's, whether it's a mixture of, aging, and, sleep deprivation I think (...) um, we won't, talk about, dementia because we don't want to talk about that (laughter) um [1] so who knows what it is [1] but, I guess that's, for me a m... a big one (...) yeah, that one comes back [1] 'cause, all my, working life, involved me, being good with my brain (...) so it's part of my identity (Peter, 69).*

For Peter instances of forgetting, and the possibility of dementia they represent, are particularly troubling given that he has relied on 'being good with [his] brain' throughout his working life. And, part of the challenge, based on this talk, lies in uncertainty; in the difficulty of ascertaining if forgetting is part of the normal aging process (including sleep disturbance), or a sign of dementia. As he constructs it, his cognitive ability is entwined with his identity; losing it would thus represent a loss of self. Although expressed as a joke, the trepidation in talking about dementia because of the anxiety it provokes is once again evident in Peter's admission: "we won't talk about dementia because we don't want to talk about that."

While this uncertainty was troubling for some participants, for Joseph there was less concern – constructed through a process of normalisation:

*It's rather strange actually what happens, you, can't remember what you did yesterday [1] but you can think you can remember what you did fifty years ago (...) and sometimes when you find that you were wrong you get quite upset (...) I've got, detailed diaries (...) you [1] you forget people's names (...) you, remember their faces but you forget their names (...) it's embarrassing (...) the only thing to do is to write it down (...) and if you're going to see somebody you write it down (...) you've got to keep a notebook or something at all times (...) well it's, what do they call it, I'm having a senior moment, I think you say (...) we all do it as we get older it gets worse (...) but you've got to be mentally active all the, same (Joseph, 91).*

Here, Joseph constructs the impact of memory loss in less ‘dramatic’ terms than others. Words such as “strange” and “embarrassing”, and the fact he gets “quite upset” when he gets a detail from 50 years ago wrong show that forgetting impacts him. Nevertheless, as he states, “we all do it as we get older” and, despite the fact it “gets worse” with increasing age, he is able to draw on the cliché of the “senior moment” in order to normalise this forgetting. Thus, forgetting does not seem to be evidence of possible dementia for Joseph. This normalisation might be considered a *secondary strategy* according to the selective optimisation and compensation model described in the introduction. The use of a notebook to help him remember, on the other hand, might be considered a *primary strategy* that serves to help ‘protect’ him from the ‘embarrassment’ of forgetting people’s names.

As with the increasing visibility of mortality, it was not only one’s own experiences that caused anxiety or trepidation, but the increasing ubiquity of dementia amongst one’s social network of peers. This can be seen in the talk of Hamish, below:

*Hamish: I’ll tell you what does worry me and that’s, we have a friend who’s getting it, is dementia (...) and I think that, a lot of people of my age, have that worry in the back of their mind (...) ah, and that’s a cruel thing to ever get and I don’t think I will and I hope I won’t but, ah, we can all be eligible and um, it’s a terrible thing for the partner (1) terrible*

*S: you talked about your own, prospect of mortality in terms of the impact it would have on your partner as well, is that, sort of how you worry about these things most, in terms of the impact it would have on your wife?*

*Hamish: I don’t worry about it (...) no I don’t worry about it, I’m aware of it (...) put it that way (1) I s’pose that it wakes me at night at times (1) it’s amazing how the brain keeps, working away when you are asleep (...) like it’s not always just the bladder that wakes you up at night (69).*

In this talk, the prescience of dementia for Hamish appears to be precipitated by observing a “friend who’s getting it.” As he continues, this means that “we can all be eligible.” Hamish considers the impact, however, in terms of the impact it has on significant others; as felt most keenly by the partner of the person with dementia. In this sense, burdensomeness is constructed as the most damaging aspect of dementia. This notion of burdensomeness that emerges with physical and cognitive decline is reiterated elsewhere and is a strong finding in the literature related to suicide in older people (Cukrowicz et al., 2011).

Hamish also initially uses the word “worry” in discussing dementia. This is noteworthy because, throughout the data, ‘worry’ was largely rejected by participants. Indeed, Hamish later rejects worry within the same extract, having initially drawn on this word. This may be influenced by expectations that men do not express vulnerability to other men - as already discussed by some participants (e.g., see ‘stiff upper lip’). Similarly, we have also seen how concern was minimised as ‘embarrassment’ or as something that is ‘bothersome.’ Xavier bucks the trend by admitting memory loss is one of the ‘scariest’ parts aging:

*So I find the memory, and that’s probably the scariest part (...) of, of getting, old (1) and also knowing, that your contemporaries (1) you know, you see some of them degenerating quite quickly (...) yes, yeah, um, (1) the mental one is one that is, always in the back of your mind (...) I did a, um, series of workshops to various big retirement villages (...) and doing sort of reading groups and things, um (1) and that was a bit scary where one partner had, sort of disappeared mentally and the other one was still fully functional (Xavier, 67).*

Again, as with other participants, anxiety is heightened here by the increasing visibility of cognitive decline within Xavier’s social networks. The threat of dementia can be seen here in the use of the term “disappeared.” This, and the concerns of other participants with regard to dementia, constructs it as a loss of ‘self.’ It echoes the ‘fear of abjection and decay;’ the ‘black hole’ discussed Gilleard and Higgs (2011, 2013). The fact that dementia was sometimes alluded to rather than explicitly articulated may reflect this concern.

Overall, more so than physical decline, the possibility of debilitating cognitive decline represents a “failure to achieve any restoration of that loss [of social agency] – in short, the impotence to mount a transgression of agedness” (Gilleard & Higgs, 2011, p. 141). Cognitive activity might be seen as an attempt to mount such a transgression – or at least slow the development of ‘impotence.’

### **Coping with the Impacts of Aging**

The previous section concerned the impacts of aging on men and, in some cases, their sense of masculinity. The following section concerns how participants sometimes deal with these impacts. It explores physical, as well as cognitive and discursive strategies, and the importance attributed to these.

### *Activity as Resistance*

Given the prominence of concern regarding cognitive decline, discussed above, it is perhaps unsurprising that many men emphasised an activity in relation to cognitive activity, as seen in the following extracts:

*So we do that [quiz with his son] each morning and um, I keep saying I've got to keep my brain alert if I need an excuse (Tim, 72).*

Keeping active mentally (e.g., through Sudoku, crosswords, reading) is constructed here as important to keeping his “brain alert”, and as a way to ward off cognitive decline. The importance of keeping one’s brain alert and active is more explicitly conveyed by Les:

*That's it [1] um, to strike the balance between a bit of physical activity, a bit of mental activity (...) and not having any, moments or lengthy periods, where there's nothing in your mind (Le, 90s).*

Concerns about cognitive decline are here expressed in terms of having “nothing in your mind.” Thus, it is important to engage in mental activity to avoid this possibility. But balance is important too. This is constructed as balance between physical and mental activity. There is a similar implication to Liam’s earlier ‘use it or lose it’ statement with regard to physical activity. It suggests that, unless one uses one’s mind by ‘keeping things in it.’

In addition to cognitive activity, the maintenance of physical activity was seen as important for similar reasons of resistance:

*I'll certainly fight to keep my, my strength up as much as I can (Michael, 86).*

In this short extract, a discourse of resistance, combat, or defiance is constructed in relation to physical strength. Below, the realisation of reduced bodily capability facilitates a theme of resistance and determination:

*So I'm (2) I'm realising, that this body, hasn't that capability it used to have (1) it doesn't mean to say I'll, put it in a glass case (...) I'm, still gonna get out there (...) I do eight lengths of swimming, I do exercises in the hydrotherapy warm water pool, three times a week and that's religious, both my wife and I do, do that (...) and it really does help us (...) our, agility is, is good*

*Sam: the realisation (...) how do you deal with that?*

*Hamish: reluctantly (...) so there is that understanding of the ah, the aging, within me (...) I do, acknowledge it (...) I've got some stone walling out the back of our house here that I've got to redo (1) that's very, when I built these walls it was very physical then, and I'm not looking forward to having to do it again because I know, um, what's involved in that (1) but I'll put my ears back and get into it, but I'll probably only do about two hours a day (...) where th...you know years ago I'd be at it all day (69).*

Hamish 'reluctantly' acknowledges a reduction in bodily capacity but refuses to 'put it [his body] in a glass case.' He takes a position resistant to physical decline and begins to reveal how masculinity is embodied. He is determined to "still...get out there" and swim. The fervour with which he takes up this activity is reflected in the term "religiously." Moreover, it appears important for him to continue to carry out his own work in the yard. Through the phrase 'putting his ears back' he paints perseverance as important, while acknowledging that he will work more slowly and for shorter daily periods than when he was younger. The imperative to keep active and fit is also discussed by William:

*It's a necessary part of, I mean, you gotta do something (...) and if you're gonna do something you've gotta be fit, I mean the time will come when I can't (...) the time has come on occasions when I, I buggered my ribs, and I couldn't do anything for two or three weeks and, then I had to pick it up again (William, 76).*

Activity is constructed as dependent on one's fitness. As William states, you "gotta do something, and if you're gonna do something you gotta be fit." The theme of enjoyment is also visible in this anticipation of a time when he will not be able to "do something." This echoes Peter's "carpe diem" response to anticipation of mortality. It is heightened, also, by past experiences where William has been inactive due to injury. The fact that he "had to pick it up again" once again constructs activity as an imperative, but also shows his determination to remain active. Determination, resistance, and satisfaction are constructed by Les, below, in relation to activity:

*I've got a large and user unfriendly garden (...) um, now it goes beyond just this little hedge here (...) it goes down toward the road (...) it's, it's a [1] it's a very, difficult garden, for the most part so [3] as I say, if I can spend a couple of hours every there, every day, it's something to, draw satisfaction from (...) it hasn't beaten me (1) even though I'm ninety (...)*

*I can't get as much done in a day as I used to, I'll admit to that (...) um, but um, it hasn't beaten me {laughter} (Les, 90).*

Combative discourse is evident in Les's assertion that "it hasn't beaten me yet." This conveys a sense of rising to a challenge and also resistance, which is perhaps unsurprising given the importance attributed to DIY and physical yard-work to A/NZ masculinity. At age 90, Les, takes "satisfaction" from being able to work in the garden. This satisfaction appears to be heightened by an admission that at his age he might not be expected to do as "much in a day as [he] used to." Thus, his achievements are recognised in spite of his age. This sense of determination in relation to yard work is also evident in the talk of Peter, below:

*I don't do much gardening (...) but I do, as is quite common with men, the heavy work round the garden (...) so occasionally [his wife] says oh, can you take out that tree for me (...) take it out and, a couple of times I've gone to do that and, forgotten, how old I was (...) and suddenly, I've just GONE AT IT, and suddenly, I have to stop and I'm, I'm going to have to lie down (...) I'm absolutely buggered (...) and I can feel my heart going and it's that, I think that's to do with, the masculinity thing, (putting on gruff voice) blokes can do this stuff! (...) right, so, (in gruff voice) YEAH, YEAH I've done that I just, chop it out! No problem! (Peter, 69).*

Here, Peter directly relates expectations of physicality (i.e., "heavy work") to masculinity through the phrase: "as is common with men." Although (partly) joking, he acknowledges that he will still attempt to 'go at it!' and carry out heavy gardening work as he did when he was younger. There is a sense of defiance in "forgetting" how old he is, and masculine pride that comes with being able to achieve physical feats such as this. Nevertheless, the masculine imperative to do such work conflicts with the 'realities' of physical decline that come with being older. This has some resonance with the talk of other men who also sometimes 'forget' that they are old. In this talk we see that age is often felt through embodiment. Below, Reginald defiantly resists aging:

*Um (1) terrified of, being, like my father (1) because people keep saying oh shit you look like your father (1) Christ I hope I'm not like him (...) two years after he'd retired he stopped playing bowls he stopped playing golf, he just (1) vegetated really (...) he just, you know, sat in the chair (Reginald, 69).*



For Reginald, the motivation to continue physical activity is constructed as determination to resist being “like his father” who disengaged completely from bowls and golf and “just vegetated,” by sitting in his chair. Comparisons with one’s father were often used in a form of downward social comparison to position the men as fortunate and foster a degree of acceptance. This is discussed further in subsequent sections.

### **Enjoyment**

An emphasis on physical activity was not only constructed as resistance to decline, but as a way to enhance retirement. As such, it also stems from awareness of increased lifespan enjoyed by the baby boomer generation of men:

*I do keep active, um, I swim regularly, I do tai chi (1) and I’ve just started a pilates group for old men (1) um, because I’m having hip trouble (1) so I’ve been wanting to, postpone, hip surgery (...) I think for me, although I’ve always exercised, I believe if you want to be happy in, and um, maintain a good state of consciousness, you need to be fit for life (...) if you want to, have an antidote to depression, um, being fit is a bloody good antidote (...) in fact I used to notice in my practice (1) that I never met, a depressed person (1) who was really fit (...) I’ve met people who had been fit, and injured themselves, and then got depressed (...) but um, so being physically fit is a good, not only a good antidote to depression, but also I think that, general wellbeing is enhanced (Max, 73).*

Max recognises the importance of physical activity in postponing hip surgery, but also for one’s ‘state of consciousness.’ For him, remaining ‘fit for life’ is a way of warding off depression. This psychologically infused talk is likely influenced by his experience as a therapist. His comment that he has met people who have been fit before injuring themselves suggests, also, that older men who experience physical setbacks and are unable to exercise or remain physically active may be prone to depression. Below, William resists an ‘activity as resistance’ type discourse to instead take up one of enjoyment:

*Sam: would you say you’re trying to, defy, aging a bit?*

*William: no, no (1) it happens (...) but, it’s much more enjoyable if you’re fit (...) it must have been ten, ten or so years ago, we went, (...) on the Inca trail (...) we’d made an effort (...) we used to live on a steep street and we used to walk to the bottom of the hill and then back up again every morning (...) and (1) that fitness made it so much more enjoyable (...) S: and was that a source of pride for you, [being able to get up there before anyone else?*

*William: [not really, no just well, personally yes but not something, I would, say anything about it's just that, it's, it's, I know it makes things, more enjoyable (...) if you don't have to worry about the fatigue issue (76).*

William links his fitness to enjoyment of the Inca trail ten years ago (around the age of 60), revealing how fitness is integral to activities taken up in the third age. He rejects the suggestion that he is defying aging to instead take up a 'realistic' position that "it happens." He also rejects the suggestion that getting up the trail before anyone else was a source of "pride" or competition, possibly to preclude any inference that he might be bragging or taking a 'superior' position to other people. Rather, the pride is 'personal' but is "not something that [he] would say anything about." This may be related to the importance of 'humility' briefly mentioned as a component of A/NZs 'tall poppy syndrome' trope. Below, Patrick also constructs the importance of enjoyment in older age:

*You know, time flashes by, and all of a sudden you're seventy, which I am (1) ah, in days gone by seventy would be the sort of end of your life expectancy but you know, I've got another, fifteen odd years to, find something to do with my self (...) just hopefully the health holds out, that's the big thing, you know, being healthy enough to enjoy it and, as I say my main concern is that suddenly something happens that you lose, the ability just to go through the normal day to day things (2) but no I'm very relaxed being retired, and I've, looked forward to it, and I've enjoyed it (Patrick, 70).*

For Patrick an awareness of increased life expectancy appears to facilitate the construction of good health as important for enjoyment of life post retirement – in other words, participation in the third age. Although there is a construction of time going quickly in the phrase "time flashes by," longevity is also constructed. As he states, he has "another fifteen odd years to find something to do with [him]self." Thus his "main concern" is to stay healthy enough to "enjoy" it. Below, activity in general is important for Xavier to maintain in older age:

*I mean I, I'm endlessly finding new and interesting thing's (...) um so just actually replacing the... making sure that there's not a vacuum which is, you know, which sort of, forms quite easily I think I mean I, there's guys who, retired from \_\_\_\_ about the same time as me who, I don't actually think have done anything you know (...) um, I mean they don't seem*

*particularly unhappy but they're just sort of, marking time really in God's waiting room (Xavier, 67).*

For this participant keeping busy is important to resist a tendency to just 'mark time' in retirement. He constructs older age as an enjoyable period of discovery. This position is established in opposition to his peers who retired at a similar time but have not "done anything." Although he states that they are not "particularly unhappy," the insinuation is that neither are they happy. Indeed, inactivity has been related to depression both as a consequence and a cause (Hallgren et al., 2016). Xavier constructs this form of idleness in retirement as static, uninteresting, and un-enjoyable through the phrase "marking time in God's waiting room." The insinuation here is that unless one is engaging in activities in older age, one is merely waiting to die. This type of idleness or disengagement is also constructed as an almost default position, a "vacuum" that forms quite easily. Thus, one needs to make a conscious decision to keep busy and work hard at this.

### ***Keeping in Touch***

In addition to physical and cognitive decline, the following have been discussed as realised or potential age-related challenges for men: loneliness; loss of self-esteem and feelings of worthlessness due to loss of employment; difficulty discussing emotions or making friends; bereavement and loss of function of wives and partners. The importance of social activity was a theme drawn on in response to these, as a way of avoiding isolation and loneliness:

*There's a lot of things yeah that you think I should do (...) and one of the things I should do is go to senior net and learn how to use a computer, I should volunteer, to help people (1) I'd like to do voluntary work (...) but I've, got a full time voluntary job here, and um, you know, I'd like to go, volunteer to help with hospice or something like that, or, you know (...) just to be in touch with people (1) we've lost touch with people, and that, that's, a bit sad (Zane, 73).*

Although 'should' implies an externally imposed imperative, Zane also constructs it as something he would like to do. He considers losing touch with the outside world, following his wife's stroke, as "sad." His ability to remain in touch with others, however, has been frustrated by having to care for his wife, as he states, "I have a full-time voluntary job here." Zane continues below, emphasising the degree of loss and the importance of social activity to him:

*Our kids have become, a very important part of our life because they've now grown to adults, and they're our best mates, and they all live in \_\_\_\_\_, so we see them pretty regularly and they come up every now and again and um, we tend, since [his wife] had a stroke we've lost a lot of contact with the outside world (1) a hell of a lot, I mean um, we, don't go to the club anymore, we haven't been to the club for over a year, um, don't get to golf as often as I should, or would like to, and um (2) you know we can't get away in the caravan and that sort of stuff (Zane, 73).*

Given the extent to which their social activity has been stymied, Zane's children have become more important; they have become the couple's "best mates," and this shows the importance of family in older age. Without their children, it appears that they would be almost completely socially isolated. Below, Hamish discusses general activity, but his talk has relevance to social activity:

*I couldn't just, couldn't just sit around and do nothing, no (...) you know, what's that TV series from a few years ago, *Waiting for God*? (...) no no no, I'm not waiting for anyone (Hamish, 69).*

Again, the prescience of death, here symbolised as 'God', is constructed as providing motivation for activity. Hamish, having fully realised that time is limited, is determined to not wait for "anyone," let alone God. This is similar to Peter's emphasis on 'carpe diem,' and Reginald's construction of impatience. Below, Xavier constructs retirement as a very busy time socially, in contrast to the talk of Zane, above:

*It's, flat out in fact it's, a full-time job, it gives you an excuse to say no to people (...) I'm just learning how to say no (...) I'm not very good at it yet (Xavier, 67).*

Xavier constructs his retirement as a "full time job" where people request a lot and he is having to 'learn' to say no to them. The contrast with Zane's talk is stark and might be considered at least partly due to the fact that Zane has to care for his wife. Thus, social activity is seen as important in all instances, but there are differences in the extent to which it can be participated in based on physical health and level of cognitive activity. Below, Hamish's talk is related to the importance of maintaining a social life, but mainly for his wife:

*I want to get out of this house because, I've got years ahead of me but, you don't know what's round the corner and if, I was to suddenly, fall over and die (1) I would hate to leave my wife in a house like this (1) we're both very compatibly agreeable to, moving into a retirement village (...) and I think it's good that we can both agree to that (1) because I talk about it with my friends and, generally their wives will say, oh, I'd give anything to move into one of those villages, you know (1) the husband, no way, what's wrong with this place? well, we're not like that, we're both agreeable to the idea (...) we've got friends that are in, villages (...) and they love it (...) um, I think it's the fact that it's a, compressed environment, compared with what we've got here, that turns people off, but, when you go to Auckland and look at the, apartment, life that people are leading (...) young people are living in shoeboxes (...) what's the problem with ah, you know, I've got no problem with that at all [...] yeah, and so that worries, that does worry me at night sometimes, I'll wake up and think, oh, if only we could get into a retirement village we'd be, much better off, and I'd be more contented knowing that, if I ever did go first, my wife's in a nice, comfortable, secure environment (Hamish, 69).*

The importance of social activity for Hamish is reflected in the fact that he is 'agreeable' to retirement homes. This position, as he constructs it, is in opposition to many other "husbands" who generally "say no way." Although he does not explicitly construct his amenability to a retirement village in terms of social activity, the contrast he makes here between women and men establishes sociability as the likely reason. As he states, "generally, [the men's] wives will say, I'd give anything to move into one of those villages." As discussed by other participants in various extracts (and in the literature), women are often responsible for organising social engagements within relationships. By positioning himself as 'sympathetic' to women on the issue of aged care, Hamish constructs a position in opposition to dominant performances of masculinity. As he states, most men consider it too compressed, but he "has no problem with that at all," and uses a comparison with those "young" apartment dwellers who live in urban centres such as Auckland.

Nevertheless, the fact that he constructs it as supportive of his wife – out of concern for what she will do if he dies before her – serves to retain, for Hamish, a position that is aligned with dominant notions of masculinity. It is ostensibly not for the same reason as women that he is amenable to retirement homes, but in service of being a 'good husband' – in other words, in service of a 'responsible carer' or 'provider' role – along with the sacrifice this performance involves. Hamish's sentiment runs somewhat counter to dominant images of retirement homes

as places of despondency, loss of freedom and independence – seen in the desire by other participants to avoid retirement homes.

### ***Fortune and luck***

Positions of being ‘fortunate’ or ‘lucky’ were often established by the men to manage the impacts of some of the challenges that have been discussed. The theme of luckiness interrelated with a process of downward social comparison (Wills, 1981), considered a ‘secondary’ strategy by proponents of *Selective Optimisation and Compensation* (e.g. M. M. Baltes & Carstensen, 2003). It involves modifying the impacts of aspects of aging that cannot be physically changed. Below, Hamish considers himself lucky compared to others:

*I think the biggest benefit [of aging] is ah, having good health, at my age (1) knowing others aren't, so lucky (1) so, no I think (1) and when I, when you get with old friends that, ah, some of my old mates that I used to hang around with when I was younger (1) and I, I look at them, their physical condition and think, boy I'm doing alright (...) I think I'm very, very lucky, to still be living, when I lost, both my parents, (...) when I was ah, ah, in my thirties (Hamish, 69).*

As can be seen, Hamish considers his current appearance and health both in relation to his peers and his parents who died early. The fact that ‘others aren’t so lucky’ enables him to accept the age-related changes he has noticed in his own health and functioning. Below, Tim compares himself to his father:

*At seventy two, I think, hell I've outlived my old man easily (1) um (1) you could make yourself into a, I don't know what the word is, real stringent on your diet [1] and all the rest of it [1] and I thought no, to heck with it, I'm going to basically eat, what I want to eat, and enjoy it, um (1) and I can still, keep the section, you know I was doing the lawns yesterday (1) mowing, and things like that [1] um, I don't know (1) for some weird reason I probably should feel more stressed about it but I don't (Tim, 72).*

Tim has “outlived his old man easily” and this appears to enable him to construct a position of enjoyment of older age. This knowledge ‘permits’ him to eschew a rigid emphasis on health and dieting. Again, ‘enjoyment’ surfaces, and is justified through downward social comparison. It is also justified on the basis that he is able to maintain some DIY activities, such

as mowing the lawns. Hence, he does not feel too “stressed” about his activity or diet. In the context of the rest of his talk here, ‘stressed’ may mean ‘guilty’ in addition to worried about his health. Below, Steven considers his good fortune while also constructing it as temporary:

*I need to sort of slow down, I've been lucky with health and, basically, well stuff like, blood pressure and, stuff like that but I, enjoy reasonable health I mean I've been extremely lucky but people of my age you've got to expect that, yeah, your body's not going to pack up completely but it's gonna (I) slow down, a little bit*

*Sam: yeah, is that something you think about?*

*Steven: I don't obsess about it I'm just, I'm mindful of the fact, but yeah, it's not gonna last forever, um, yeah but no I've had a few (I) you never know what's going to, come round the corner you know heart attacks, strokes, um (I) yeah I don't obsess about it but okay, you go to the doctors every 3 months and just have a check-up, or (if its) sickness or yeah, so if you just keep doing that (Steven, 68).*

Steven constructs a position as someone who is ‘lucky’ in comparison to what might be expected for someone his age; in other words, in comparison to normal, expected, physical decline or senescence. In this sense then, his luckiness is almost unexpected. For this reason, he considers his health as something that he needs to take more care of. His talk establishes a need to ‘slow down’ and, perhaps, disengage. Thus, disengagement becomes a strategy that might help one survive longer. Moreover, the burden of healthcare in older age is once again evident in his discussion of the maintenance required to stay healthy. Below, gendered comparison establishes a fortunate position in relation to health for Patrick:

*Yeah, yeah well I do that under sufferance, every other year I sort of go in and, get the old digital examination, and just, grin and bear it but yeah, women are quite used to that sort of thing (...) it's not helped by my doctor, who's fairly laid back and sort of says, what the hell have you come to me with this, for? (Patrick, 70).*

Patrick positions himself as reluctant to obtain a prostate examination, here euphemised as “the old digital examination.” The fact that he does it “under sufferance” and has to “grin and bear it” speaks to how uncomfortable this procedure is for him, and perhaps can be for other men. However, the comparison to women, who are “used to that sort of thing” appears to ‘ease’ the impact of the examination. The ‘relaxed’ manner in which men often approach health matters is further constructed by Patrick as a masculine quality through recounting his

doctor's "laid-back" attitude. Although humorous, his doctor's comments point to the fact that men less often seek help for health-related complaints. This has been a robust finding within the literature, much of which has framed this reticence within masculine constructs of invulnerability, and control over one's body (e.g., Courtenay, 2000; Z. E. Seidler et al., 2016).

Previous studies have identified masculine constructions of hegemonic masculinity as inimical to the vulnerability that is seen to characterise health seeking (Courtenay, 2000; George & Fleming, 2004; Huggins et al., 1996). But Patrick's doctor's 'laid-back' approach speaks to the ways in which certain aspects of masculinity in relation to health can also be reinforced by agents within the health system. Thus, masculinity does not only impact health-service use in a uni-directional way but takes place within a system of gendered relations that may implicitly endorse certain gendered health practises. Although the doctor's quip ironically rests on an understanding that men do not seek help for health matters with the same frequency or urgency as women, it might be considered as simultaneously reinforcing this understanding. Patrick's concern is insinuated as trivial. Moreover, there is perhaps an implicit suggestion that the male doctor should not be troubled by such trivial health matters. This might be enhanced by consideration of research suggesting that females "are situated as primary health providers" (OliFFE, 2009, p. 361). Thus, men's health, according to this traditional view of gendered relations, might be considered the responsibility of women. Patrick's account of his interaction with his doctor is also interesting in reinforcing suggestions that men are less likely to disclose health problems with male doctors, despite choosing male doctors more readily (Himmelstein & Sanchez, 2016b). The humorously flippant response of Patrick's doctor might suggest why men may be more reluctant in this sense. Moreover, as (Himmelstein & Sanchez, 2016a) speculate, male doctors may be chosen more than women doctors because they are seen to be more competent. If this were, true, men may be less reluctant to seek help for what they deem to be 'minor' health matters.

Alternatively, it should neither be assumed that hegemonic masculinity invariably encourages negative health practises; as Creighton and OliFFE (2010) argue, 'positive' health behaviours may also display rationality and control that are central to conceptions of hegemonic masculinity. Moreover, these may be more commonly associated with relatively privileged men (in terms of finances and education) than those from lower classes (Buckley & Ó Tuama, 2010). As such, Patrick's interaction with his doctor may reflect an ironic appreciation of the need for men to seek help for health complaints, between two relatively privileged men.



The prostate examination stands out as a relatively novel age-related concern for some of the participants. This is due to prostate cancer being more common in older age; but the examination might also represent the first ‘intrusive’ medical procedure that many men have to experience. This is underscored by the comparisons to women made Patrick. Previous literature has identified a dominant discourse that constructs women’s bodies as ‘leaky’, unstable, and permeable; while the values accompanying masculine bodies have been associated with solidity and wholeness (Shildrick, 1997). The prostate examination thus appears to challenge the impermeability and wholeness that, until older age, has existed for many men.

### ***Acceptance, Pragmatism, Realism***

While luck was occasionally raised as a way of accepting some of the impacts of aging, this section focusses on themes related to acceptance - including ‘pragmatism’ and ‘realism.’ As with the downward social comparison process involved in utilising talk of luck or good fortune, this ‘cognitive’ strategy might be considered a ‘secondary control strategy’ according to *Selective Optimisation and Compensation* theory:

*Um, I still, I still have done a lot of, building and (2) moving stuff around, but it’s within the realms of what I can do*

*Sam: sure, are you happy with that?*

*Tim: I mean, I’m probably realistic with it (1) I’d always wish I could do more if I’m digging a, a post hole, it’s (1) I’ll get puffed in a few minutes and rest on the spade, and have another go (1) but I think that’s part of my own physical fitness (...) I suppose if it [dementia] gets me then that’s it (...) I have, sort of a fatalistic approach to that sort of thing, if it gets me then what can I do? (...) that’s life (...) and I’m not worrying about it because it isn’t here yet, I’ll go on doing what I’m doing as long as I can (Tim, 72).*

Tim maintains continuity with engagement in ‘DIY’ activities such as “building” and “moving stuff around.” This has not been at a similar rate to when he was younger but is “within the realms of what [he] can do.” This comment echoes the capabilities approach (Stephens et al., 2015) which emphasises what people can do, despite their limitations, rather than attempting to hold all older people to a singular, universal standard of activity or success. Tim’s positioning here is non-emotional -

neither happy nor sad but rather, “realistic”. This position is further entrenched in the rest of the extract, where the term “fatalistic” is used. As he states, “that’s’ life.” He does not worry about it because there is no point in doing so; it “isn’t here yet.” Below, Zane talks about his setbacks due to his wife’s stroke but approaches these similarly, with an ‘easy going,’ relaxed approach:

*But you adapt (1) you adapt because I’m (chuckling) an easy going sort of guy, I just adapt (...) it doesn’t, really (2) worry me all that much, I mean that’s just life, life is life, and you’ve got to, take it on, as it comes, at you (...) and if your, health’s buggered up, you’ve gotta give up certain things\_ (...) if your wife gets crook, you’ve got to, adjust to that (Zane, 73).*

Once again, a position of ‘adaptation’ is adopted here – similar to the approach taken up Tim. As Zane states, it is his “easy going” outlook that allows him to adapt. As with Tim, he states that “that’s life.” Again, there is nothing that can be done about it, except to adjust one’s life when necessary. Below, Tristan balances expectations of himself with acceptance:

*Yeah, it’s like...and I suppose anyway I’m 84 for god’s sake so (...) but um [1] I’m just being careful (...) you know I... I have to watch where I place my feet*

*Sam: (...) does that, ever get to you or?*

*Tristan: no [1] no I’m pretty pragmatic actually, that’s the way things are*

*Sam: so you just sort of accept that, there’s nothing much you can do about it, sort of thing?*

*Tristan: {laughing} well, there is actually, I can go and get some bloody exercise (84).*

For Tristan the urge to remain active is balanced by a simultaneous acceptance of one’s limitations – framed here as ‘pragmatism.’ He concedes that he is ‘84 for God’s sake’ – revealing realistic expectations of himself. This recalls the downward social comparison used to establish positions of ‘luckiness.’ He accepts that physical inactivity is ‘just the way things are.’ But a contradiction emerges when I reflect that ‘there’s nothing [he] can do about it. Tristan demurs that he could ‘get some bloody exercise.’ Not meeting the standards set by an active aging discourse can result in negative self-appraisal (i.e. ‘lack of determination’; ‘laziness’), even as one acknowledges that expectations must be tempered by one’s age. Below, Bryce uses a different term (than ‘pragmatic’) to take a similar position:

*There's the physical decline (...) I've noticed, physical, deterioration*

*Sam: yeah, and when you notice them, how do you deal with that?*

*Bryce: well again, I try to be philosophical (1) if there's something you can do about it, you do something about it, otherwise (1) I've been to see the doctor about my knees and so on, but otherwise you just have to, it's my fault for living this long (laughing) we weren't designed to live into our sixties and seventies (66).*

In response to the “physical deterioration” that aging has brought about, Bryce remains “philosophical.” This is essentially the same theme drawn on by the men elsewhere: one that accepts there is no choice but to accept it. Bryce also draws on biological discourse to construct increased life expectancy as a ‘bonus’ that comes with existence at this time. He humorously blames himself (“it’s my fault”) in order to take up a position that is, once more, almost lucky. It is not only in relation to physical setbacks that positions of acceptance were created, but also in relation to cognitive decline:

*I forget things now (...) my memory is not as good as it was (...) that's something yeah, I mean I'm very conscious of that (...) it was a ah, one of those things that, is happening, and maybe um it will become you know, where I become worse, I'm sure it will (...) but ah, you've, just got to accept it (...) it's just one of those things (Michael, 86).*

Michael is “very conscious” of deteriorating memory. As already seen, cognitive decline was something that the participants were most worried about. Nevertheless, Michael takes up a position of acceptance almost similar to resignation. As stated elsewhere, many of the men were reluctant to accept that they might be worried. It was argued that worry is inimical to hegemonic masculine qualities of invulnerability or invincibility, and men did not want to be seen as complaining. Below, Liam rejects worry explicitly:

*I think you can, you know, worry about these things too much and then probably end up (with flu?) worrying about them (...) you know, try and do the things not to, let it happen but um, you don't want to be worrying about these things either (1) I think you can, well let's put it this way you can almost talk yourself into it can't you? (Liam, 78).*

Liam appears to be balancing two themes: resistance and acceptance. With regard to the former, he states that “you try and do the things not to let it happen.” Nevertheless, he considers trying *too hard* to resist aging as risky; presumably, it might cause one to worry by focussing too much attention on it. As he states, “you can almost talk yourself into it.” As worry is incompatible with acceptance, Liam also appears to be advocating acceptance. Similarly, Anthony discusses acceptance of the present moment as important:

*As I get older it's about being realistic that your body isn't what it used to be and, you can't do what you used to do (...) and quite often you know you live in the, you can live in the past (...) or you can just accept that this is the way it is now and, do the best you can at that, with what you've got (...) um, I find myself getting more tired (Anthony, 72).*

Again, a ‘realistic’ position is taken here in relation to physical decline. Anthony constructs the importance of not “living in the past,” and instead advocates a *capabilities* approach (e.g. Sen, 1993) that values “doing the best you can...with what you’ve got.” The resistance to living in the past reveals a key way in which changes in masculine status are negotiated. As Anthony intimates, if one compares one’s functioning to a younger self, then one might construct regret. But comparing oneself to others the same age can leave one appreciating how fortunate one is. Nevertheless, although Anthony constructs the pitfalls of ‘living in the past,’ Selwyn’s talk, below, shows that it can be hard to not think about one’s previous functioning:

*You know you're getting older, you've just got to put up with it (...) and, measure what you can do and what you can't do (...) so you, play within your limitations (...) every now and then I'll do something and then I'll think (1) think of how I'll um (2) how I used to be able to do something more freely (Selwyn, 70).*

Here, Selwyn does not dwell on his impediments, stating a pragmatic attitude of just ‘putting up with it’ and a compensatory strategy of ‘playing within [his] limitations’ which again suggests a capabilities approach. Nevertheless, he does admit that “every now and then” he will think of how he “used to be able to do something more freely.” This suggests that, despite not ‘dwelling’ too much on one’s impediments, comparisons are sometimes automatically made with one’s younger life. It was not only in relation to physical decline, but death (which is perhaps what decline ultimately represents) that positions of acceptance were constructed:

*I look from the point of view that, see, Parkinson's doesn't kill you (...) and I just, ah, adopt the attitude that I've got it, can't do anything about it (...) you know, we've all got to die sometime (...) that's it, and move on (...) it can be hard some days (Leonard, 70).*

Although, as Leonard states, “Parkinson’s doesn’t kill you,” he nevertheless takes a position of acceptance in relation to death – perhaps because illness and physical setbacks serve as reminders of mortality. As Leonard states, there is nothing that can be done about death. Consequently, one must “move on.” This imperative to keep moving implies, again, the importance of not ‘dwelling’ on death. This may be because it represents a more anxiety provoking possibility; it may be that thinking too hard about death stops one from living fully - as seen with those men who expressed impatience. Despite the importance of moving on, Leonard admits that “it can be hard some days.” It is unclear whether he is specifically talking about the impact of living with Parkinsons, or the ability to not think too hard about death. Possibly it is both. Below, Zane considers mortality and the futility of denying it:

*I mean, if it's gonna happen it's gonna happen there was a, story in the news on the weekend of a, was it 28 or 34 year old man just dropped dead he had a, um a genetic, heart condition, you know it said a, couple of his siblings had died when they were tots or, you know real infants so, if it's gonna happen it's gonna happen you know (...) and you can't um, and I'm not (I) trying to eat healthy bread or go on fads like that I'm not a, you know (Zane, 73).*

Zane uses another form of downward social comparison here to construct a position of almost fatalistic acceptance. In this case, the comparison is made to those who are young but die anyway. Thus, there are no guarantees that one will live at any age. This example, in addition to facilitating a position of acceptance, also facilitates a position of almost defiance. Zane is defying what might be called a ‘healthy’ aging discourse that promotes successful aging as predicated on a healthy diet. Rather, the unpredictability of life and death are reasons to ‘enjoy’ life by not “going on fads.” In this sense, Zane’s position is similar to the ‘carpe diem’ approach of Peter, earlier, in which an appreciation of life is heightened by consideration of death. As can be seen, there was a certain amount of pragmatism associated with accepting, or ‘coming to terms with’ a wide range of age-related limitations or concerns. This may be related to the stereotypical ‘she’ll be right’ attitude that is culturally constructed as belonging to A/NZ men.

### ***Practical Adaptations***

Some participants adopted practical strategies to adapt to, or offset, impairments in function. Using the parlance of *Selective Optimisation and Compensation* theory, these might be considered ‘primary control strategies.’ As will be seen, the importance of continuity emerges in these adaptations and accommodations. Below, Selwyn discusses the adaptations he has made to continue the things he enjoys, despite limitations:

*All your time and effort goes into (1) trying to do the things that you can do (...) I mean, I can't run anymore, I can walk, I do a lot of cycling, I've ridden the length of New Zealand on a bike, when I retired (...) people said, what are you going to do when you retire? And I retired at sixty, and I thought, (why don't I ride?) a bike from Cape Reinga to Stewart Island? And I did (...) I didn't do it all at once (1) I did it over a three-year period (...) but I got there (...) yeah I'm pretty proud of that (...) with my knee buggered this year I've only managed to get to five hundred [kilometres] but um (1) but I just ride around town, I don't go out in the country for long rides anymore (1) used to go out to \_\_\_\_\_, and \_\_\_\_\_ and things like that, but now I just drive, round the flat town, parts of town, keep away from the hills (Selwyn, 70).*

Selwyn has accommodated physical setbacks by taking up cycling - a lower impact form of exercise. He appears to take pride in cycling the length of the country following retirement. And, although he now finds the hills difficult, he does what he can by cycling on the flat. The importance of continuing activity for him can be seen in these adaptations. Below, Zane reveals that continuity can be achieved through ‘replacement’ activities:

*You look forward to different things I mean, I probably watch a hell of a lot too much TV nowadays (1) um (1) but because, of the Tour de France, the All Blacks, the Warriors, the golf, I follow golf and, yachting and all that sort of thing (...) so that's the highlight of your life now, watching others do things that you'd like to do (Zane, 73).*

Zane here constructs the amount of television he watches as “too much”; the slight self-recrimination that comes from not fulfilling the active aging discourse is again evident here. But “watching others do things that you’d like to do” suggests the importance of continuity for him despite his limitations in actively pursuing these. Watching sport on television ‘replaces’

playing sport. Below, William discusses the accommodations he has made in response to reduced strength and stamina:

*[Aging] changes what you do (...) and you do them a bit more slowly perhaps (...) I don't go on any hard-tramping trips now, I haven't carried, an overnight pack (...) but we carried fourteen day packs (...) in the early days (I) I couldn't even lift it up now (...) that's forty, fifty kilograms (...) in the gym I set myself some targets on the rowing machine (...) and I've been, keeping up, my 2.2 kilometres in ten minutes, for quite a while now (...) um, yeah I do, I do set myself some targets there, and I, try not to recognise that I'm, getting older (...) by, sticking at what I used to do (William, 76).*

For William, age has changed what he does with regard to tramping. Nevertheless, in order to continue to tramp, he has made practical adjustments, such as carrying more 'day-packs.' However, a certain amount of defiance is also evident in the fact that he "tries not to recognise that he's getting older... by sticking at what [he] used to do." Thus, once again, a balance between discourses of defiance and acceptance is evident. Below, Xavier discusses how he has adapted through Epicureanism:

*We've sort of got this new, form of old age that no one's actually experimented with (...) and the thing that interests me is not trying to do it as a sort of decrepit young person, is, and so I've sort of been reading, um, things, I mean I've sort of gone back to, um, oh, Epicurean philosophy and sort of the, the, the ancients who were dealing with a pre-medical world who were dealing with sort of, physical, decrepitude relatively, younger and, and how you, in fact, grow old and, keep functioning despite, um, you know, despite not being sort of, not having the body you had when you were sort of nineteen or something and, and I've found that's useful (...) I mean Epicurianism if you're going to follow it is a philosophy of the aged (...) I wouldn't recommend it for anyone young it's not a, you know, you wouldn't waste your time with it it's a, it's comfortable because the tenets are easier to follow, um, you know, once the fires of youth have died down a bit (Xavier, 67).*

Xavier constructs a position, necessitated by increased life expectancy, that sits outside the norm; a 'new form of old age that no-one's experimented with.' For him, getting older has necessitated a change in approach to accommodate the pain associated with growing older (e.g., arthritis). Embracing Epicureanism is something that has worked for him and helps him to

enjoy the third age. This philosophy consists of living simply and moderately in order to minimise pain. It is a “philosophy of the aged” for these reasons but is not suitable for younger lifestyles. His insistence on “not doing [old age] as a decrepit young person’ suggests that taking up a different habitus in older age is “useful” – if not necessary. The goal is to “keep functioning despite... not having the body you had when you were nineteen.” The use of the word “keep” implies continuity. The idea of using “better tools” (a primary adaptation strategy) in order to continue to enjoy one’s activities or function in older age is explored by Reginald:

*So, yeah the aging body, catches, is catching up*

*Sam: does that impact on your, sense of life satisfaction or, wellbeing or, like,*

*psychologically, does that impact you or*

*Reginald: no (...) the reason I’m saying no, is um (2) if people say to me, you’re playing a lot of golf now so you’re getting better at golf (1) no I’m not (1) I’m actually getting worse at golf (...) but I’m getting worse (1) happily, (...) because I know that, I’m not gonna have the flexibility or wherewithal to play the, shot as I used to, and I see quite a lot of, a number of golfers as they get older and a very good friend of mine who’s, got Parkinson’s (1) and um, (1) still playing golf with him (...) he’ll, just pick the wrong club, and I’ve said to him, oh and another, friend of mine (...) why don’t you hit your driver, off the par threes? (...) I played with him just on Tuesday, he hits his driver off all the par threes (...) he’s up around all the par threes (...) because he’s come to terms with it (2) my other mate (1) hasn’t (...) he’s still, still tries to do that, whereas I’ve come to grips with (69).*

A strategy of adaption is used by Reginald, a keen golfer. The selection of better ‘tools’ – heavier golf clubs – allows him to hit the ball a similar distance, despite injury. Reginald takes a position that is ‘realistic’ about age-related physical decline. By contrast, his friend has not adapted his golfing technique and is in denial about the realities of aging. Thus, a certain amount of acceptance is constructed as a necessary precursor to continue (almost) as before or, as Reginald puts it, to “get worse happily.”

There appeared to be some satisfaction in finding a ‘solution’ to the physical difficulties wrought by aging. This practicality evokes the ‘number eight wire’ stereotype discussed above. Moreover, the various strategies employed lend support to the capabilities approach advocated by Sen (1992, 1993b, in Stephens et al., 2015). This involves working within one’s limitations and acknowledging success based on realistic expectations of what one can do (i.e., not expecting to meet the same physical targets as one’s 19-year-old self). It appears that



acceptance of aging and its related challenges is a necessary component of being able to adapt and continue – within one's limits – to enjoy the activities previously enjoyed. Below, the benefits of aging are explored. The 'benefits' are organised under only one major theme. Nevertheless, this theme is broad and encompasses a range of components. As will be seen, acceptance has prominence within this talk.

### ***Older and Wiser: The Benefits of Aging***

A key theme drawn on by participants discussing the benefits of aging considers older age as a time of increasing wisdom, insight, calmness broadened perspective, liberation, or 'self-integration.' These qualities are encapsulated here under the 'older and wiser' umbrella. Many of the men in this research recognised this theme, accepting it and thereby constructing themselves in this way:

*Certainly, as one gets older (1) there is, a liberation from what other people think (...) you're not so worried about appearances, of status, ah, ego identity (2) so I think there is a shift as we get older, and a letting go of those, sort of ego stories, what's sometimes called the false ego (...) and, I think (4) and, you're more (2) prepared to be humble (2) you're more prepared to serve others instead of thinking everything's got to be about you (...) or so caught up in achieving your own goals, and ah (2) that you're more prepared to let go of your own (1) ego kind of (1) stuff (1) and, be of service to others and um (1) so that's a shift I think in, consciousness as, a man gets older (Max, 73).*

Max draws on a psychodynamic discourse to construct older age as shedding 'the false ego' and embracing a 'truer' self through serving others and relinquishing one's own goals. In this talk, the importance of remaining 'useful' again surfaces in the notion of "service to others." Below, Peter constructs older age as liberating in the face of consumerism:

*I mean there's a huge [1] and growing, pressure [1] consumerist pressure, in our society (...) and I think, a lot of people become more, immune to that as they get older (...) 'cause they've been through that (...) and they've gone out and got the latest whatever thing it is (...) and they've realised that [1] it's not such a big deal (...) and that thing I really wanted it's only a month later [1] and, I'm now wondering what the hell to do with it because, I don't use it (Peter, 69).*

Peter considers experience and age here as providing ‘immunity’ to “consumerist pressure.” As he elaborates, this comes from repeated experiences of buying “the latest whatever thing it is” before being disappointed and ultimately becoming resistant. The resistance to consumerism might be seen as rejection of the commodification of aging that some theorists consider integral to the third age. Below, Les constructs several aspects related to the older and wiser theme:

*Well, um, I'm much calmer (...) um [3] I don't um, I'm very fortunate in that I don't have any [1] I don't have many hang ups (...) ah [1] and, there are not many things left, that I haven't done (...) that I wanted to do (...) um [1] I'm financially secure, which is a big thing when you get older (...) um [2] and um, I'd say I, get a lot of satisfaction out of um [1] simple pleasures (Les, 90).*

As can be seen, calmness, or “not having hang-ups” is integral to Les’ conceptualisation of older age. The calmness is related to having achieved many of the things in life that he wanted to achieve. Financial security is also constructed as an important component of this calmness, presumably because it eliminates what would otherwise be a significant form of pressure. One might speculate therefore, that for men who have not been able to achieve many of their goals in life, or have not achieved financial independence, regret might disrupt their appreciation of older age. Financial security once again emerges as an important consideration and, in an echo of Xavier’s emphasis on Epicureanism, there is enhanced appreciation of the “simple pleasures.” Below, Xavier again discusses Epicureanism, relating it to the older and wiser theme:

*Oh god it's [aging] bloody marvellous it's sort of (...) sometimes the, the raging fires of, of your youth, you bloody, spend a hell of a lot of time dealing with fuck ups you made because you're, because you're slightly out of control (...) I quite like it, it's much calmer, um, I mean Epicurianism if you're going to follow it is a philosophy of the aged (...) I wouldn't recommend it for anyone young it's not a, you know, you wouldn't waste your time with it it's a, it's comfortable because the tenets are easier to follow, um, you know, once the fires of youth have died down a bit (...) um, (2) I actually find, I find with the writing it's not something I could have done when was younger it's a product of, all the various skills and, experiences have come together and that allows me to do that (...) and I mean I couldn't have done it when I was younger because I didn't have the, all the bits hadn't, formed up*

(...) um (3) I just feel calmer, and more, more at ease with myself (...) you know I'm not some, I mean I've had slight problems with addictions and things but, when I was younger, um, and that sort of goes really you know because you're not, the bits that give you the buzz are sort of (chuckling) not buzzing anymore (...) yeah, so, no I mean I, I feel really, I actually, I was just saying this to someone the other day, you know, I'm feeling more at ease with myself and happier than I have been since I was about twelve you know, before the fires of adolescence which totally disrupt your life for, however long it goes on for, um, I'm actually really enjoying it and it's been really nice since [his wife] retired that we, we appear to be able to, continue to function (Xavier, 67).

Xavier considers aging as 'marvellous' because, in contrast to youth, one is not governed by one's passions to the same extent and the confluence of experiences from one's life opens doors to new skills, such as writing. The summary statement that Xavier “feels more at ease with [him]self” captures the sense of having transcended previous difficulties in his life, such as addictions. The period of life since Xavier was “about twelve” is governed by one's passions, or the “raging fires of youth”; full of “fuck ups” made “because you're slightly out of control.” The contrast with Xavier's embrace of Epicureanism is stark but suggests that simplicity and detachment from ‘worldly pleasures’ might facilitate a sense of contentment. This suggests, once again, that success as an older man arises from not attempting to recapture youth but developing new skills and adapting to the challenges that age can bring. Despite the fact that he elsewhere [partly] took up the grumpy old man discourse, Reginald constructs tolerance as a key aspect of aging below:

*Probably, as I've gotten older, I've become more tolerant, of, of, um, other people and their actions (...) yeah, having been a principal for so long, I find it really difficult if we're sitting around, at a meeting, not taking over (...) and even when I was a principal I'd be at, meetings, or principal's meetings and things and, and, think to myself, we're talking about these things here, but really this is the important bit here, you know, we need, I wish, the chairperson, would sort of, get us over here quickly (...) and I've had to (2) quite often what I'd do (1) would be, step in and say, and then you end up, basically running it, so you've got to be really careful, you know, that don't do that, um, but I don't know whether that's just masculinity or the fact that you just, want to get it done quickly (Reginald, 69).*

Although older age ushers in tolerance, Reginald recognises that, when he was working as a school principal, he would become impatient and “want to get it done quickly.” He

constructs the fact that he would want to ‘take over’ as due to impatience but also raises the possibility that this is masculine behaviour. This was considered by Zane, earlier, in his suggestion that women would rather “sit around and have a chat.” Nevertheless, as he has “gotten older” Reginald has “become more tolerant of other people and their actions,” suggesting that with age this impatience decreases. It is possible that, rather than referring to aging per se, he is discussing retirement – in which he no longer has to run or attend work meetings. In this sense he is reiterating the ‘grumpy old man’ theme in a similar way to Peter (see ‘Grumpy Old Man’), who constructed retirement as liberating for the reason that one was freed from work place stresses. Thus, this theme functions to support disengagement theory, in that disengagement from work and work-related activity has positive benefits for those who embrace it. Another variation on the ‘older and wiser’ theme is present in the way Charles considers attitudes to women, below:

*I suppose so, yeah, and I think you do, um become more aware (...) with time about um, I suppose attitudes towards women and treatment of them and things that, weren't perhaps normal in one's younger days which make your hair stand on end now (...) so one likes to think one has grown out of that (...) and I don't mean well I don't think I was ever a particularly awful male chauvinist pig or anything like that but you, no you do become aware of the, sort of, put downs of women and things like that (...) not unkindly meant just thoughtless I think (Charles, 70).*

In a similar vein to Xavier's discussion of the 'raging fires of youth,' Charles constructs himself as having a more thoughtful attitude towards women. The opposition with younger hegemonic masculinity constructs gendered power imbalances as a part of this. However, in older age, this appears to be replaced by an awareness of the ways in which women are objectified, and a rejection of this. Below, Ewan suggests that the ‘liberation’ of older age applies to most older men:

*I can't speak for all of them what it's like, um (1) but I would think, it's pretty universal the experience, the expression I have is that, gee, I've never been here before (1) meaning I've never been this age before and it's not, in using that expression it's not that age, it's not that ah, particular age, it's that era, in your life when you're over (1) over the hill basically (1) um, and that has a lot of ah, derogatory connotations but ah (1) it's being said, maybe by a*

*lot of people who haven't been there before themselves because I've reached this stage, and I think that I, told you previously that um (1) it's great, it's actually quite good*

In the phrase 'over the hill' Ewan recognises decline and decrepitude and reframes them positively. As he implies, "derogatory comments" are usually made by those who have not reached this stage of life; and there is a slightly surprised realisation that it is not as bad as the discourse of decline might have us believe. Indeed, as he constructs it, it is "actually quite good." Ewan continues below:

*We're not celebrated for who we are, there's an expectation placed on most of us to be other than we wish to be (...) we don't usually reach a point of becoming comfortable in our own skin (1) (...) over the years (1) I have managed to become comfortable in my own skin (...) yeah, so I think most of us go around, particularly those of us who haven't been celebrated by our parents (1) and made to feel, good in the world about who they are, and their relationships to others, and, yeah, most of us go around and fake it til we make it (...) that's what I see in a lot of youngsters, and I see, the commercialists, knowing that's the case (Ewan, 70).*

Ewan here constructs older age as a time in which one becomes "more comfortable in one's skin." For him, one's younger self is constructed in response to expectations from others. The implication is that older age allows us the space to construct our own identity, in contrast to younger life in which you "fake it til you make it;" this suggests that one's younger self is less authentic. Getting older is thus a process of recognising this and embracing a more 'authentic' self. We also see in Ewan's talk here, a rejection of the "commercialists" that echoes the rejections of consumerism discussed by other participants, above. Max again draws on the older and wiser theme, below:

*The awareness of, um, of imminent death, um, is another aspect of the aging male (...?) that. Although we've liked to live our lives, believing ourselves to be, bullet proof (...) um, there's this more, realistic notion, that, the end is nigh, kind of thing, the grains of sand are running out, in the hour glass (...) and, that (2) is not a bad thing (2) because it can add a poignancy to life or, an appreciation of the way it is now (...) um (2) and a letting go of being (1) perhaps more achievement driven as a younger man (2) that ah, you let go of that (1) achievement driven stuff, that ego stuff, the um (2) and, I think that's an important part of aging for men is to um (3) be less ego driven, to acknowledge, the lack of importance of oneself (1) the*

*imminence of death and, ah (2) and I think for, aging men, and no doubt for aging women as well (1) but it does, kind of, invite a revisit, of spiritual values and, and what meaning you attribute to life (1) so I think aging, um, kind of, almost forces you (1) to revisit, those areas (...) which again I don't think is a bad thing (Max, 73).*

For Max the proximity of death in older age brings a poignancy that can enhance one's experience of the later years. However, this is contingent upon having "come to terms" with one's life decisions. This involves letting go of one's ego, the act of striving for achievement, and revisiting "spiritual values." In this way, Max draws on a theme aligned with gerotranscendence theory. This was a development of disengagement theory that discussed aging as a time of new-found perspective (Jewell, 2014; Tornstam, 1997). However, Bryce, below provides a counter to gerotranscendence and the older and wiser discourse:

*Sam: and what about positive aspects of aging? Have you noticed any?*

*Bryce: (laughing) oh, I can't think of any off hand (1) I mean, people say, silly things like wisdom but (1) older people aren't wiser than, middle aged people (...) might be wiser than teenagers, maybe, but maybe not (1) you still see silly driving (...) you still, see people, running red lights now (1) it doesn't matter what age they are (...) no I haven't, noticed, any great advantages to getting older, in fact I haven't noticed any (66).*

Bryce recognises and rejects the older and wiser theme. Rather than endorsing it, he instead appears to construct older age as a time in which mistakes are made, just as in other times in one's life.

As can be seen then, the men drew on a range of themes in discussing older age and masculinity. I have attempted to group these under headings related to the construct of masculinity and what this means for men; the values that these older men hold, and how these inform their lives; challenges related to aging for men; ways of dealing with these challenges; and the benefits of aging. It can be seen also, that some of these themes relate to broader discourses of aging and masculinity that were covered in the introduction. The following section considers these results and relates them in greater depth to discussions around aging and masculinity.

## Chapter 7: Discussion

This research set out to explore the ways in which men made sense of masculinity in older age. It took a social-constructionist approach to exploring how older, able bodied men constructed masculinity in A/NZ; where and when themes in their talk might be traced to; possible developmental changes in constructions of masculinity and how these might be negotiated; and the extent to which older masculinities in A/NZ are impacted by issues related to embodiment, including physical decline and physical ailments.

A number of theories and frameworks for exploring age and masculinity were considered, including gerontology theories, theories of masculinity, and critical post-structural approaches. Many of the theories of aging reviewed in the thesis might help conceptualise the ways men talked about their experiences. These include disengagement, activity, and continuity theories; motivational theories, and selective optimisation and compensation (SOC).

However, the fact that elements of each were found suggests the inadequacy of a grand, ‘one size fits all’ theoretical approach. These theories reflect different discourses; different ways of understanding and constructing elements of aging masculinities. As already discussed, many of these are prescriptive, and as such their ‘recipes’ for what successful aging means were sometimes resisted, and sometimes taken up, according to individual contexts. Inconsistencies, paradoxes, and contradictions are thus not unexpected within a social-constructionist framework. Indeed, gender and aging are not fixed or stable, and participants are expected to shift between different positions, through drawing on various discourses.

Nevertheless, critical, discursive theories such as hegemonic masculinity are favoured for their ability to critically account for the ways in which wider discourses might comprise subjectivities. Sen’s (1993) capability approach - adapted by Stephens et al. (2015) for consideration of aging - also helps understand the ways individuals negotiate the demands of aging, and possible motivations for doing so. The notion of ‘control strategies’ in the Selective Optimisation and Compensation (SOC) framework also provides good explanatory power.

### **Responses to the ‘question’ of gender**

Preliminary questions regarding masculinity were posed in service of broad research questions relating to how older men construct masculinity in A/NZ, and where and when talk about masculinity can be traced to. Responses to these were sorted into the following themes: the invisibility of masculinity; gender neutrality; and pro-feminism, anti-feminist.

The invisibility of ‘masculinity’ may be due to its conceptual fluidity. Unless they had opportunities to reflect on gender (such as through facilitating men’s groups), gender had little obvious personal significance. Nevertheless, the lack of ‘opportunities’ is, in itself, telling. It should be considered within a cultural context in which heterosexual, Pākehā, masculinity forms the normative masculine base (Cosgrove & Bruce, 2005). Although it has been difficult to define hegemonic masculinity, some have observed that it has historically been associated with being white, middle class, heterosexual, and *able* (Connell, 1995; Robertson, 2006; Schippers, 2007) as these statuses have been imbued with normative power. In a sense, then, the men already ‘performed’ aspects of hegemonic masculinity by virtue of their ethnicity, heterosexuality, physical ability and (in most cases) financial security. As such, gender was a normative given for participants who had little need to question or think about it.

In considering why this might be so, hegemonic masculinity, and related theories such as ‘hybrid masculinity’ and masculine capital are important to consider. It has been stated that there has been conjecture over what hegemonic masculinity ‘is’ with commentators identifying ‘slippage’ and reification in the ways it has been reduced to identifying a certain ‘type’ of man that exhibits toxic, aggressive, or dominant behaviours (Connell & Messerschmidt, 2005). The talk of men in this research reveals that this is certainly not the case and provides an example of the ways in which hegemonic masculinities involve ‘positive’ behaviours such as providing for one’s family and, in some cases, recognising one’s gendered privilege through comparisons to women.

And yet, in the ways some participants talked about masculinity, one can begin to see how gendered power might be perpetuated. To recall the definition of hegemonic masculinity provided by Schippers (2007), hegemonic masculinity: “is the *qualities defined as manly that establish and legitimate a hierarchical and complementary relationship to femininity* and that, by doing so, guarantee the dominant position of men and the subordination of women” (p.94, italics in original). The processes by which this happens might be akin to processes of hybridisation, which considers the ways in which hegemonic masculinity can sustain gendered hierarchy by taking aspects of subordinated masculinities or femininities into account.

There is an increasing awareness of white masculine privilege within society. I argue that such awareness has contributed to the egalitarian theme of gender neutrality evident in the data. This argument is informed by McRobbie’s (2004) notion of a ‘double entanglement’ in which feminism is taken into account and attacked. Egalitarian and pro-feminism themes worked to create gender-neutral subject positions that were sympathetic to the privilege(s) men have traditionally enjoyed at women’s expense. Awareness of disparities in pay, gendered



expectations regarding household roles, and emphases on personality rather than gender were typical of this type of positioning. In these ways, gender was ‘taken into account’ by some participants. However, although the deployment of egalitarian talk by men might suggest that hegemonic masculinity is becoming more inclusive of feminist sensibilities, this conclusion should not be hastily adopted. The concept of ‘hybrid’ masculinities (Bridges & Pascoe, 2014) suggests that hegemonic masculinities are often able to incorporate conflictual elements in order to appear inclusive, while still entrenching masculine privilege. In this sense, hybrid masculinities are able to take feminism into account.

The talk constructs gender neutrality in a similar sense to that observed by Riley (2001): that “all people should be treated as individuals and not by their category membership” (p. 67). In paying no attention to the ways in which gender differentiates men from women, the gender-neutral position obfuscates the operation of gendered power. As a ‘post-feminist’ (McRobbie, 2009) theme, it “effects the erasure of sexual politics” (O’Neill, 2015, p. 111) within contemporary societies while simultaneously allowing men to take a position supportive of gender equality. In addition to arising from awareness of gender issues, the gender-neutral position may also have been established in relation to participants’ assumptions of my position as a gender researcher.

It would be unreasonable, however, to maintain that the men who took a gender-neutral position asserted there were no differences at all. Rather, that the differences do not matter to them (i.e., they are not ‘sexist’) - or else are due to ‘individual’ factors such as personality. This facilitates the erasure of gender politics. It is in the use of gender-neutral concepts such as personality which - position men positively in relation to women - that the operation of hegemonic masculinity is visible. Nevertheless, it was also telling that there was occasionally conflict between gender-neutral discourse and overtly stereotypical gendered discourse, which constructed women in unflattering and essential ways.

It is important also to note differences between participants in the levels of critical awareness of gender. Xavier, for instance, had an appreciation for masculine privilege through his experiences as a ‘stay at home’ father. This challenged gendered expectations at a time when men were not expected to carry out such a role. According to dominant understandings of gender at the time, this would be considered a kind of ‘role reversal.’ It provided experience of not having control of one’s finances and, as he put it, not being “the centre of the universe”. Max also demonstrated critical awareness of the ways in which gender influenced his life, stemming from his work supervising men’s groups. Accordingly, he demonstrated considerable critical reflection on gender issues. The participants’ talk suggests that increasing

acceptance of diverse performances of masculinity and critical reflection may begin to erode the processes by which gendered power is perpetuated. This may also enable one to negotiate age-related changes with relative ease.

The fact that some participants did not overtly challenge the taken-for-grantedness of their masculine privilege, nor question their assumptions, is because they have never been ‘forced’ to. This is due to their privileged status and speaks to notions of *complicity* and the *patriarchal dividend*, which are essential components of hegemonic masculinity. When these are considered, one can begin to see why men’s privileged status is very rarely questioned by men – to do so would be to undermine the very advantages they may have enjoyed over their lifetimes. These include such advantages as being able to pursue careers while their wives or partners looked after children and opportunities for career advancement; or being able to maintain physical activity by being fortunate enough to retain life-long physical function.

### **The Values Important to Men**

Despite some uncertainty about the meaning of masculinity, masculinity as a construct was inferred through the participants’ responses to questions regarding what values were important to them. In considering these questions, participants drew on the following hegemonic masculine qualities: provision, being an involved father, reliability, usefulness, independence and autonomy (including not being a burden), freedom, physical activity, physical strength, authenticity, self-reliance (e.g., DIY), the importance of humility, and an expectation to embrace limited interests (e.g., rugby, racing and beer). Some of these qualities may be considered ‘positive’ or, in other instances, limiting. Regarding the latter, masculinity was seen to place limits on emotional expression (i.e., the ‘stiff upper lip’). These qualities are arguably hegemonic, given that most of them were discussed as pressures or expectations participants felt compelled to conform to; or else, in conforming to them, felt that they were ‘successfully’ performing masculinity. These types of qualities are also considered hegemonic based on a substantial literature that has identified them as such. They have been observed at global, regional, and local levels. For instance, at the global and regional levels, they are visible in the activities of “feature-film actors, media broadcasting/publishing personalities, professional athletes, corporate executives, and politicians” (Messerschmidt, 2008, p. 106). Although there has apparently been more acceptance of different ethnicities at this level, controversies over the number of black actors nominated for film academy awards, or else discrepancies in the amount of black and women politicians who make it to the top levels speak to the continuation of this hegemony. Within A/NZ, at the regional and local level they have

been consistent with the traditional 'Kiwi bloke' masculinity observed within previous literature (e.g., Bannister, 2005). Thus, qualities and practices are deemed to be hegemonic because they appear to provide a sense of masculine pride or self-esteem; likewise, where such qualities are constructed lamented as lost, they are considered hegemonic. In each of these cases, what is retained, or gained, is celebrated because it is assumed to be an 'ideal' quality associated with the practice of masculinity. Such qualities may also be valued because they set individuals apart from other men who may have impaired ability to perform them. Similarly, it is argued that the sense of loss relates to inability to claim to aspects of hegemonic masculinity (e.g. physical ability).

Some participants positioned themselves outside of the readily identified stereotype of 'rugby, racing and beer.' The importance of rugby and beer to the construct of A/NZ masculinity was visible in this opposition, as much as in its embrace. The significance of rugby (and other competitive sports), for those who expressed an affinity for it, was constructed as a way of developing confidence or demonstrating physical prowess. For those who identified as 'outsiders', rugby was synonymous with toxic 'macho' values such as violence and aggression. The pressure to conform emerged in the talk of one participant who did not like beer but, when in the company of men, constructed excuses for not drinking it; and who could talk about rugby if he 'had to.'

Those hegemonic masculine qualities identified in the stereotype of the 'metrosexual' were also found, although did not form a consistent theme. Only one participant discussed taking pride in appearance and this talk was thus not included. Nevertheless, it was suggested that the metrosexual values of fitness and health were tied to considerations of the third age. A generational change in the way that masculinity is defined in older age could be seen a taking-up of activity and the divide constructed between participants and their fathers in respect to this. This was most visible in these participants pointing out their longevity exceeded their fathers.' One participant admitted to being 'terrified' of turning out like his father, who was idle for much of his later years; who sat on the chair and "vegetated."

For most of the participants, 'macho' masculinity, aggression, and other displays of physical dominance were eschewed and may be considered non-hegemonic. This assertion is bolstered by the talk of men who considered physical intimidation as important – particularly when they were younger but distanced themselves from such qualities in older age. Reginald recounted using his physical stature as a teacher to intimidate a miscreant student and expressed significant remorse over this. Thus, aggression and physical intimidation may have been 'hegemonic' in a different (younger) context but appeared to be replaced by values such as

tolerance and peace in older age (as seen in the ‘older and wiser’ theme). Nevertheless, Max appeared to value his physical stature for helping to defend himself against actual, or anticipated violence and expressed some loss over no longer being able to do this as effectively should such a situation arise. Overall, the talk in relation to physicality suggests that subjects may choose between ‘multiple selves’ (Chapman, 2005) but there is a movement towards choosing a passive stance in older age – sometimes necessitated by declining physical strength.

Provision emerged as a strong theme related to masculinity. Provision includes more than just financial provision; it extends to provision of time and energy to family. It may be considered hegemonic, in that the performance of provision yielded a sense of pride, satisfaction, and respect. A discourse of sacrifice was in some cases inseparable from provision. Many had worked hard for their families, sacrificing social life and major purchases. Some participants expressed regret that their role as provider took them away from their family. This tension is well established in the literature; for instance in the stigma that stymies men seeking flexible work arrangements despite a desire to do so (Vandello et al., 2008; Vandello & Bosson, 2013). Nevertheless, the regret was ‘offset’ by the respect they earned from their children.

The influence of cohort cannot be discounted in considering the importance of the breadwinner discourse, which is synonymous with ‘the provider.’ Expectations around gendered ‘roles’ in the 1960s can be observed in the core tenets of disengagement theory. Men’s primary role was ‘instrumental’ while women’s was ‘socio-emotional’ (Cumming & Henry, 1961). These constructed roles might be expected to have (gradually declining) relevance through the 60s, 70s and 80s– the decades participants were raising children. Thus, where the norm of provision (in whatever form it took) had generally been constructed as met by the men, there was satisfaction. Where they had not provided time or another aspect deemed important as, there was regret.

### **Age-related Challenges to Masculinity**

A key hypothesis underlying this research was that age would challenge A/NZ men’s sense of masculinity, thereby necessitating changes in how masculinity is constructed. This is based on the premise that masculinity has traditionally been conflated with ableism (F. K. Campbell, 2014; Goodley & Runswick-Cole, 2013) and younger, hegemonic masculinity constructed in relation to embodied qualities of physical/sporting prowess (e.g. Paechter, 2003; M. B. Parker & Curtner-Smith, 2012), sexual voracity (e.g. Limmer, 2014), and invulnerability (e.g. McVittie & Willock, 2006). In short, “being bulletproof,” as several participants put it. The challenges that surfaced in relation to aging included the burden of deteriorating health

and the cost of healthcare; uncertainty related to mortality and finances; challenges to physical activity and ability; anxiety related to cognitive decline; social isolation and loneliness; remaining respected and relevant; and declining sexual activity. Some of these challenges are directly linked to the values constructed as important by the participants and therefore might be considered as threats to masculinity.

Changing relations to health and embodiment are among those impacts of aging that appear to represent a difficult transition for men. The notion of being ‘bulletproof’ is supported by literature suggesting that men less frequently seek help for health-related complaints (e.g., Courtenay, 2000; Mahalik et al., 2007). Courtenay (2000) related such avoidance to hegemonic qualities such as invulnerability – values also endorsed by the men in this research.

Indeed, the increased need to take more notice of health appeared to be relatively novel –and burdensome - for participants. Several listed the various physical ailments they were experiencing; one described older age as surprisingly ‘painful’; another constructed health as his biggest ‘worry.’ Yet another proclaimed that “old age ain’t for sissies” because of the toughness required to negotiate health difficulties. Others had been impacted by degenerative disease (e.g. Parkinson’s) and had experienced procedures that struck at the core of masculine identity (e.g., prostatectomy, resulting in inability to achieve erections).

For these men, then, older age and its accompanying challenges represented a sort of ‘shock’; however, it is important to note that the ‘shock’ accompanies a life-long experience of physical capability. Although speculative, the experiences of men who enter older age having already experienced forms of disability in younger age may not experience older age in such ways. Indeed, as Shakespeare (1999) asserts, aging “can be a particular crisis for the able-bodied man when he loses physical prowess, because so much of his identity is constructed on the basis of strength and invulnerability” (p. 63).

The very position of being physically capable in one’s 90s is one that enables proclamations that ‘old age ain’t for sissies’ – the ‘toughness’ referred to by this participant is here synonymous with the ability to physically negotiate the demands of aging. The fact that this brought personal pride shows the importance of such notions to older men who have not been ‘forced’ into positions of physical dependence. Indeed, this participant drew on an ableist discourse in deriding people in rest homes of similar age for ‘complaining’. It is the fortune and advantage of being physically capable that allows such an assessment.

The salience of the prostate examination may be related to gendered discourses regarding the body that are established relatively early in life. Shildrick (1997) theorised that women’s bodies have been constructed in western society as ‘leaky’ and permeable; and

Kristeva (1982) argued that the maternal women's 'fluids' are symbols of abjection for their dissolution of barriers between the internal and external. As gender is traditionally constructed in binary fashion (Lorber, 1996) the opposite values of impermeability (i.e. being 'bulletproof') have defined masculinity. This reading is supported by participants' resistance toward a prostate examination (e.g., Patrick "enduring it under sufferance"). Moreover, the way in which 'endurance' of the procedure is rationalised through comparison to women is telling in revealing the binary – and perhaps the erosion of this binary. As discussed by some, women routinely experience cervical smears, periods, or other intrusions and leaks.

Schippers' (2007) argument that masculinity is constructed in Western societies based on attendant values of 'penetration', 'intrusion' and 'dominating' might also underlie the salience of the prostate examination for men in older age. As an 'intrusive' procedure, it reverses these power relations, eroding the "social boundaries around the body and care of the body" (Higgs & McGowan, 2013, p. 22). Increasing health issues and check-ups may thus be harbingers for the dependency and decline of the fourth age. Indeed, some expressed that health complaints had made them more aware of mortality. Some researchers (e.g., Sinnott, 1984) have argued that as men age, they move towards a more androgynous identification, and masculinity becomes less salient. The parallels with women, increases in physical vulnerability, and attendant reliance on others (i.e. healthcare professionals) may underlie such assumptions. Nevertheless, other forms of performing masculinity in older age – such as activity and DIY – show that some elements of masculine identity remain important to these older men.

Other impacts of aging struck at the core of what participants valued. 'DIY' was almost universally acknowledged as important to them *as men*, and may be considered hegemonic at least within the 'regional' (Connell & Messerschmidt, 2005) A/NZ context. Again, the importance of DIY for these men may be influenced by their physical ability to maintain this to a certain extent. This is an ability that almost all men in this research had been fortunate enough to experience throughout life, and hence continue into older age. Thus, DIY can be said to be important for able bodied men. This conclusion may not extend to disabled men.

For the men in this research, DIY ranged from carrying out heavy gardening work, to home renovations, manufacturing projects, and making repairs. Many constructed these tasks as expectations that their wives – or wider society - had placed on them; but they also expressed pride and satisfaction at being able to accomplish them. For some (i.e. Peter) this was ironic masculine satisfaction that was nonetheless palpable. In his embrace, and rejection (i.e., of the caricature) of such 'hyper-masculinity,' Peter shifts between 'multiple selves' in line with social-constructionist theory. This suggests that, in contrast to what agentic, individualised

theories of aging might promulgate, older age remains ‘open-ended’ (Chapman, 2005); ‘self-integration’ remains as far from realisation as it ever was – except perhaps in the acceptance of these shifts.

For most participants the physical decline associated with aging had curtailed continuation of the same levels of DIY activity enjoyed when younger. There was a subdued sense of loss or regret at this in the talk of some participants. One framed this as increased financial cost, as he was forced to out-source jobs he would have formerly done. Regardless, a sense of continuity appeared to be important, even if the DIY work was limited or slow. Indeed, there was almost an increased satisfaction at being able to achieve some household tasks despite, (or because of) the recognition of the difficulties in doing so.

Although the role of provider had been important to participants throughout their lifetimes, the expectation that men would remain the provider appeared to wane with older age. Nevertheless, family and relationships remained important. One participant constructed ‘successful’ masculinity as having a significant other, and most of the men appeared to value the contributions of their wives. Some had taken on the role of caregiver where their wives’ functioning had been impacted by aging or illness. Unsurprisingly, then, there was a significant sense of loneliness constructed by the widowers in this sample. Anticipating that he would die before her, one participant had educated his wife about the household accounts so she could ‘carry on’ without him.

And yet, another participant who expressed loneliness did not desire the company of others. He eschewed approaches by women; and resisted the retirement home despite acknowledging its potential for social interaction. The only participant who had never married (Steven) expressed contentment with being solitary. It is important to note, however, that he continued to work in a role that provided social interaction.

Sexual functioning was assumed to be a core feature of younger hegemonic masculinity; as such, I anticipated that it would be impacted by aging. This was supported in the talk of the participants, one of whom indicated that, “at our age you’re past it.” It was hypothesised that this impact would result in a sense of ‘lost’ masculinity. However, this generally did not appear to be the case – however, one participant constructed regret that he had not slept with more women. Although the participants who discussed sexual functioning reported having less, or no sex, they did not universally express a sense of loss at this. Most simply positioned themselves as ‘less interested.’ There were exceptions: Hamish, for instance, expressed less of a desire for sex, but also appeared concerned that he was unable to satisfy his partner sexually. As he constructed it, she was more interested in sex than he was. Max could no longer attain

an erection due to a prostatectomy. Nevertheless, he was able to retain an (hegemonic) ability to satisfy his wife sexually through cunnilingus. Moreover, he had gained an ability to achieve orgasm without ejaculating. This reveals the ways in which masculinity may be renegotiated through sexual practice (i.e., to become less reliant on penetration) despite functional impairment. In this way, then, sexuality was renegotiated.

For some, age brought apprehension about dependency – most visibly in the form of aged care. The reluctance to enter aged care is unsurprising given that many constructed independence and freedom as important. The corollary of independence is burdensomeness, and many constructed this as undesirable. One participant constructed retirement home residents as ‘vegetables’ and ‘burdens on society’ – symbols of abjection. The influence of neo-liberal discourse can be seen in refutation of disengagement. However, the dissonance between this position and the anticipated inevitability of eventually living in aged care appeared to be a source of consternation for this participant. Others anticipated pain and discomfort (the fourth age), taking up anti-euthanasia or ‘pro-choice’ positions.

Similarly, cognitive decline was a challenging aspect of aging for men – despite, or because of uncertainty as to whether this would occur. I have argued that cognitive decline is feared for the same reasons as dependency. Namely, as a symbol of the fourth age, it represents disintegration of the ‘self’ just as profoundly as physical decline. As one participant put it, his ability to think and digest information had been integral to his career, and his self-identity was entwined with these skills. Thus, what might be considered ‘normal’ instances of forgetting, or age-related memory loss were regarded with suspicion and anxiety as potential signs of more serious deterioration. The seriousness of this concern was also reflected in the euphemisms used to allude to it, and references to the fact that one participant would not ‘mention’ or discuss it. However, such concerns could not be said to belong to aging men specifically.

Some participants also discussed that, as a society, older men are generally not respected. The dominant stereotype of the ‘grumpy old man’, may have some part in fostering this disrespect. Nevertheless, some participants constructed this as ‘true.’ Where the grumpy old man position was taken up it was related to having ‘seen it all before.’ Acknowledgement of the pitfalls in adopting positions of intolerance were constructed by one participant as providing distance between generations and causing bitterness. Moreover, following retirement, some participants recognised the potential for a loss of meaning and purpose in their lives—more so than for women. Women, as some constructed them, were generally better equipped to maintain social networks. However, there were contradictions to this position. These are



explored below in the ways in which challenges to older age are negotiated through attempts to remain relevant.

### **Ways of ‘Negotiating’ Masculinity in Older Age**

I have argued, above, that aging presented many challenges to what the participants deemed important as men. Nevertheless, it is significant that few constructed a profound sense of ‘lost masculinity.’ This may be due to the aforementioned difficulty in pinpointing what masculinity ‘is.’ It may also be due to the participants’ ability to renegotiate masculinity in older age or shifting notions of what constitutes masculinity. Such consideration of the ways in which the men ‘dealt’ with age-related impairment is complex. A central quandary regards the extent to which the very aspects of masculinity themselves mitigated against expressions of vulnerability and loss. This is a possibility posed by Twigg (2004) who suggested that ‘public invulnerability’ and ‘competitiveness’ might account for the relative lack of research into the ways aging impacts masculinity.

In support of this possibility, some participants constructed A/NZ masculinity as partly defined by the importance of maintaining a ‘stiff upper lip’ – that is, not being overly effusive in expressing emotions. Although this was often observed from a ‘distance’ (i.e. in one’s father, or ‘A/NZ men’ more generally), some related personal pressure to refrain from emotional discourse in all-male contexts. As the interview itself was an ‘all male’ context, some of the participants may therefore have been reluctant to construct aging as emotionally difficult. On the other hand, some admitted that they ‘would not talk about this stuff’ with other men, suggesting a reasonable general level of disclosure.

The reluctance to disclose negative emotion or vulnerability may lie behind the rejection of ‘worry’ as a concept. Where ‘worry’ was constructed, it was sometimes replaced, moments later, with ‘concern’. Whenever I proffered the possibility of ‘worry’ it was generally rejected. Although none had expressed that they were ‘depressed’, some appeared melancholic at times, and constructed older age as involving loss (e.g., as a period of “sad decline”). This was particularly true for the widowed men who expressed loneliness. This is consistent with previous research suggesting men are prone to be impacted by spousal death to a greater extent due to masculine imperatives to not disclose or discuss emotionality (Bano & Benbow, 2010).

Related to the ‘stiff upper lip’ construction is the laconic, ‘laid back’ ‘kiwi bloke’, defined by what is stereotypically and colloquially referred to as the ‘she’ll be right’ attitude; and seen in the common ‘no worries’ saying. One participant constructed his doctor as ‘laid back. Another considered himself ‘easy going.’ As such, the difficulties that he elsewhere

intimated as concerning were reconstructed as relatively unproblematic. There appeared to be some tension between the ‘laid back’ position and frustration at the impact of his wife’s stroke on the couple’s functioning.

Others used terms such as ‘pragmatic’ and ‘realistic,’ which are similarly related to such cultural constructions and may be preferable to positions of vulnerability. A/NZ men are not expected to complain. Despite generally appearing to accept the inevitability of decline, some also constructed what might be considered denial in actively choosing not to think about it. It is possible that the ‘laid back’ acceptance, and ‘stiff upper lip’ discourse might provide a barrier to men seeking help in older age, particularly when considered in relation to independence and the avoidance of burdensomeness. The influence of the active aging discourse, which places responsibility for health and well-being in older age (Stephens et al., 2015) on the individual might be seen in these constructions.

Alternatively, it may be that the cognitive strategies men used to ‘accept’ or ‘cope’ with the impacts of aging are effective in reducing anxiety about the future and a sense of lost masculinity. There are several ways of interpreting such acceptance. These interpretations relate to this research’s concerns about which theories of masculinity most accurately account for the ways in which older men make sense of aging.

The *Selective Optimisation and Compensation* (e.g., Baltes & Carstensen, 2003) model theorises how aging is negotiated by older people. To use the parlance of motivational theory, ‘primary’ control strategies were emphasised in conjunction with secondary control strategies to ensure a state of ‘equilibrium’ or life satisfaction. This is consistent with Wrosch, Heckhausen, and Lachman (2000) who identified that older adults “reported an increased reliance on secondary control strategies but also on primary control” (p. 397). Primary control strategies of ‘task modification’ were evident in the use of practical adaptations in order to continue to participate in activities. These included, for instance, use of different ‘tools’ (e.g., golf clubs); and doing the same things ‘more slowly’. These appeared to be in the service of continuity. Secondary control strategies – to which acceptance belongs - included downward social comparison. Comparisons were frequently made to peers who had experienced ill health in order to construct ‘fortunate’ or ‘lucky’ subject positions. Similarly, many noted that they had outlived their fathers; or drew on the biologically infused ‘use by date’ discourse that ‘humans weren’t designed to live this long.’ In relation to the burden of health care, comparisons were made to women. When comparing their current functioning to previous functioning, they also tempered expectations based on what might be expected for their age.

However, as noted earlier, SOC has been criticised as prescriptive in its assumptions that people should maintain a sense of continuity in older age in order to ‘age well’ and reach an end point of ‘self- integration’ (e.g. Chapman, 2005). It is not my intention to recreate this assumption here. As Chapman (2005) points out, the assumption is inimical to the concept of ‘multiple selves.’ As social constructionist research, this study shares the view that selves - are constructed and adopted through interaction. Nevertheless, the ‘control strategies’ to maintain aspects of activities the men enjoyed were evident. These may reflect attempts to ‘preserve’ aspects of self in accordance with widespread, dominant discourses that construct self-integration as desirable (a discourse that informs and is perpetuated by SOC and other theories). However, the presence of other ‘selves’ has also been revealed in this research, in the tensions between acceptance, defiance, continuity, and adaption to change. Thus, various ‘control strategies’ may be considered as themes in themselves. This assertion is bolstered by consideration of the differences between secondary control strategies (i.e. downward social comparison; acknowledgement of senescence). As such, they were not necessarily in the service of an end point of self-integration but in managing, and making sense of, change.

Another way of interpreting these positions of acceptance is through consideration of context. Taking up Goffman’s (1959, in Newman & O’Brien, 2013) notion of ‘frames,’ older age might present a macro ‘frame’ through which performances of masculinity are judged. This too has resonance based on talk that acknowledged the participants’ age and constructed their expectations accordingly (e.g., “I’m 72, not 22, 32, 42”). Thus, performances of masculinity are not judged on the basis of more ‘youthful’ standards, but against men of a similar age and habitus.

Some of the assumptions of gerotranscendence theory were also taken up by participants. This theory elaborated on disengagement theory to present older age as a time of increased wisdom, insight, and peace. This type of discourse is most visible in the popular image of the ‘sage.’ Through the ‘older and wiser’ theme, many participants constructed older age positively, as a time of emancipation from the ‘fires and passions of youth’ and trivial concerns over what other people think. This type of discourse stood in contrast to the ‘grumpy old man’ theme, which was also borne of experience but characterised by intolerance and frustration. The choice between these was constructed in places as one that older men might consciously make. As such, they represent ‘possible selves’ that exist for men in older age.

The emphases on acceptance and ‘realism’ is not to assert that the men disengaged, having accepted that “age wearies and the years condemn” (as one participant put it). Indeed, there appeared to be a balance between acceptance and resistance in how the men coped with

age-related decline. This was visible in one participant's recognition that, although he was becoming less physically capable, he would not 'put his body in a glass case.' Others took a combative approach to physical activity through figures of speech related to resistance to the inevitability of aging. Thus, while accepting that aging is inevitable and irreversible, there was determination to engage in activity based on one's capabilities.

Activity was also constructed as a way to augment one's experience of older age through enjoyment. As one man stated, it is about being 'fit for life'; and another: "life is more enjoyable if you're fit." This discourse of activity-for enjoyment fits with understandings of the third age. There was recognition that, with increasing life-expectancy, there may be many years left and a commensurate expectation that these years should be enjoyed. Paradoxically, although there was awareness that there may be many years left, the awareness was sharpened by mortality and an appreciation the 'lottery' of health.

For all participants, physical activity appeared to have been important – and attainable – prior to retirement. Thus, physical activity in older age represented a sense of continuity. Moreover, as Becker (1993) emphasised, a semblance of continuity is maintained by older people when their ability to continue in previous ways is compromised. The 'replacement' of physical activity with watching sports appears to be a way to maintain continuity for at least one participant. For another it was to cycle on the flats rather than up hills.

Critics of the active aging discourse have expressed concern that it sets up unrealistic expectations, so that those who do not meet active aging standards may be ostracised or become despondent. There was limited evidence of this in the talk of participants who commented that they are 'lazy' for not engaging more actively. Nevertheless, the acceptance that one's age stymies physical activity was able to protect these men from severe self-recrimination and allow them to also embrace 'disengagement.' As one discussed, he "should be doing more" but enjoyed reading his kindle. Another indicated that he was not "trying to eat healthy bread or go on fads like that"; in this sense, he could be considered to be resistant to the active/ healthy aging discourse.

Thus, activity and disengagement theories are, in themselves, inadequate in considering the pressures facing men in older age, as each could be identified within the talk. And, individual, contextual, factors influenced the reasons for these discourses being engaged. The ability to invoke 'secondary control strategies' (P. B. Baltes & Baltes, 1990) meant most participants were relatively forgiving of themselves for not being as active as they once were.

An important point with regard to considerations of activity, disengagement, and SOC concerns the fact that these men, with relatively few exceptions, were able to maintain a certain

level of activity and continuity due to good health and physical condition. All lived in their own homes, and none had experienced the type of dependency they were apprehensive about (i.e. retirement homes). It is possible that older men who experienced greater levels of incapacity may relate to 'activity', 'engagement' or continuity differently. They may also lament more fully the loss of physicality as an aspect of masculinity. It is worth noting, however, that the one participant most impacted by incapacity - through Parkinson's disease - was able to continue many of his previous activities through primary and secondary control strategies.

A variety of types of activity was constructed by the participants as important. Cognitive decline was arguably more concerning than physical decline; consequently, cognitive activity assumed great importance as a way to ward off cognitive decline. Social activity in the form of volunteer work or social groups was considered important, for at least two reasons. Firstly, as a way to avoid social isolation and loneliness, which most of the participants recognised as a risk. Secondly, as a way of remaining useful, relevant, and respected - encapsulated in the phrase 'not going to seed.'

While participants recognised that men may not be respected as they entered older age, some considered that respect would not be extended to those who look and act decrepit. Thus, as long as one remains within the third age, and resists the decline associated with the fourth, one may be respected. Technology was constructed as a visible form of evidence for one's ability to 'keep up.' Some men expressed pride for being able to stay abreast of developments in technology and to solve related issues. They expressed puzzlement and light censure against those older people who 'give up' and consider technology outside their reach. While 'keeping up' appeared to be achievable, it may not be possible for all to continue in this way. Censure for such men - who may 'look and act decrepit' came from some participants, revealing a subscription to active aging discourses and little tolerance for those who 'succumb' to disengagement and bitterness. One participant, in his 90s, stated that older people would not be respected "if they stay at home and do nothing and grizzle all the time." Another, also in his 90s, stated that if he "walked with a walking stick and a limp" he may be viewed negatively but, as it is, he "can step it up with the best of them."

More fully than activity and continuity theories, a capabilities approach captures how these men made sense of their lives post-retirement. Thus, I concur with Stephens et al. (2015) who argue that this approach is preferable to active aging as it maximises *everyone's* chance of aging 'successfully.' The approach enables older people to define what success is for themselves and maintain a sense of continuity while not being 'chastised' for falling short of the activity targets espoused by dominant (consumerist) discourses. As constructed by men in

this study, the continuity of ‘masculinity’ means finding ways for men to carry out activities they enjoy - but at a slower pace than before. The data also fitted well with the ‘optimum aging’ framework advocated by Scharlach (2012, in Stephens et al., 2015): “continuity (the ability to maintain established preferences), compensation (support from the physical environment), connection (meaningful social interactions), contribution (a lifelong need to have a positive impact on the environment) and challenge (opportunities for stimulation)” (p. 727). The participants generally constructed these as important, either through experiencing them, or being aware of not experiencing them.

One must recognise the limitations of this sample have influenced what conclusions might be drawn. Social class, ethnicity, and physical ability are three of the main limitations discussed. It is important to note that this sample was comprised entirely of men who might be considered physically able throughout their lives. The lifetime health status for these men may have influenced some of the aspects they found challenging and important in older age – and, alternatively, may have enabled them to continue to live in ways that other men may not have. The disability literature suggests that men with disabilities have to confront issues of loss of physical and sexual functioning earlier in life, potentially leaving them better equipped to cope with the challenges of aging (Shakespeare, 1999). Alternatively, disabled men may have a different set of challenges and values in older age to the men in this sample, and aging may raise new and different challenges.

## **Conclusion**

Although critical studies of masculinity have proliferated recently, there has been a relative lack of research in relation to aging masculinities within A/A/NZ. This research sought to redress this within a A/NZ context through exploring the ways men made sense of masculinity as they aged. To my knowledge this research was the first of its kind within a A/NZ context.

One suggestion which drove this study was the idea that age would impact masculinity but, rather than considering themselves ‘demasculated,’ men would renegotiate masculinity to retain a sense of being masculine. Thompson Jr (2019) criticised the tendency in work on aging masculinities to presume one masculinity across the lifetime, so that aging is seen as a time of diminished masculinity, rather than “contextually and temporally cultivated and performed” (p. 1). The current research indeed shows that the latter is the case. It was not presumed that the impacts of aging would invariably be ‘negative.’ Nevertheless, decline was a key component

of this thesis and, was constructed from a base of lifetime physical ability and relatively good health that largely persisted into older age. The difficulty in answering questions about the extent to which aging challenges masculinity was further compounded by difficulty defining what masculinity *is*. To the extent that masculinity is defined by physical ability, strength, or activity, one might argue that it *is* affected by aging. However, this may be more so for these men who have been able to draw on such constructions and apply them to themselves. However, it is interesting to note that disabled sportsmen still drew on notions of physical prowess within a sporting context (Lindemann & Cherney, 2008) suggesting that physical ability is important for men regardless of their status in that regard but can be renegotiated by focussing on relative physical ability. In other words, it may be more important whom one compares oneself to. As has been seen, most of the men in this study were able to accommodate physical challenges through a range of strategies, including practical adaptations and cognitive or discursive practices. Thus, many men were able to acknowledge and accept the limitations that aging brought with it. In many cases, pride was apparent when participants were (still) able to carry out physical work around the house. Indeed, activity was carried out by most of the men. This was not in the service of ‘denying’ aging but was overwhelmingly framed as a way of remaining healthy or enjoying life post-retirement.

The other major area that might be said to be specific to men (as opposed to women) was related to sexuality. Generally, a lack of interest in sex was described in contrast to younger life. But being able to sexually satisfy one’s wife appeared to remain important for some. Other aspects of aging that were pertinent in this study might be hypothesised as non-specifically masculine - consideration, and acceptance of mortality might be amongst these; so too the anxieties about cognitive decline. It has been argued within the literature that women remain better at maintaining social activity in older age, but this remains unanswered in this study. Some men who lived by themselves did articulate feelings of loneliness, but loneliness is by no means specific to older men.

It appears that, within the ‘frame’ (Johnson & Goffman, 1976), ‘sub-culture’ (Gubrium, 1972) or ‘habitus’ (Bourdieu, 2011) of aging, then, different qualities may be hegemonic than those which are considered hegemonic by younger men. Where some of the same hegemonic qualities, such as physical ability, continue to remain important, there nevertheless appears to be a modification of expectations; a recognition – and appreciation - of the capabilities one *does* have rather than a focus on what has been ‘lost’.

Moreover, there appears to be a sense of freedom from the expectations of others that comes with being older, as expressed by many participants. This very freedom from other’s

expectations, and the related ‘wisdom’ may itself result in freedom from the pressure to fulfil hegemonic masculine values. Thus, overall, a sense of ‘continuity’ with regard to masculinity was generally negotiated in line with a capabilities approach, using both primary and secondary control strategies.

### **Limitations and Future Directions**

The breadth of this research is recognised as a limitation. This breadth stems from an exploratory approach that set out to consider the ways in which masculinity and aging might intersect. Each is a complex construct in its own right, and there were many disparate findings to emerge from the data.

One limitation in this research included my own reluctance to make participants feel uncomfortable by ‘pushing’ them into areas they may not have felt comfortable discussing. Thus, aging may have impacts on masculinity that remain uncovered by my questioning. Nevertheless, this is an important consideration in itself – as potential evidence of the ways in which the barriers inherent in constructions of masculinity obfuscate attempts to question it.

The participants were ethnically homogenous. Hence, this study is unable to shed light on the ways in which masculinity might be constructed in older age by those who are not Caucasian. As briefly touched on in the introductory chapters, there may be important differences between Pākehā and other ethnic masculine identities in A/NZ (e.g. Māori and Pasifika). Moreover, many of these men were in relatively stable financial positions, meaning that they did not experience many of the financial setbacks and restrictions that other older people in poverty might experience. This financial stability allows them to negotiate some of the changes that aging brings.

Moreover, the sample was comprised entirely of men living independently. This implies good mobility - an important component of well-being according to several studies (Ziegler & Schwanen, 2011). Thus, it remains to be seen how dependence and incapacity might impact on one’s sense of masculinity in older age, and how profound this loss is likely to be. One might hypothesise, based on the talk of the participants in this study, that the impact would be considerable. Nevertheless, we have seen how men have been able to negotiate changes to retain a sense of continuity; there is no reason to expect that this may not continue throughout the whole lifespan; in other words, the ‘dreaded’ fourth age may never arrive. Thus, flexibility and psychological adaptation are qualities that should be nurtured in men throughout their lives, but particularly in older age. This may be served by upsetting the rigid boundaries that have traditionally defined successful masculinity.



this research tells us little about the ways in which men who have experienced disability might relate to masculinity in older age. In this sense, the men in this study might once again be considered privileged in approximating what might be considered hegemonic masculinity. This status will likely have influenced the aspects of masculinity the men consider important.

Without comparative studies with women, it also remains difficult to ascertain to which some of these impacts of aging might apply specifically to men, although some assumptions have been made on this score. Likewise, given that the men in this research invariably fitted into a dominant or hegemonic masculinity category by virtue of their sexual orientation and ethnicity, future research might explore aging masculinities with non-heterosexual men, or men who identify as belonging to an ethnic minority. One might expect that the flexibility these participants were able to practise in negotiating the changes wrought by aging may not be as accessible to those who do not enjoy the privilege(s) associated with being a financially stable, heterosexual, Caucasian man in a socio-cultural environment that has traditionally valued these.

Despite these limitations, this research adds to the burgeoning literature on masculinities and aging by showing that aspects of masculinity retain their importance as men age. This is in contrast to previous research that has suggested that older age is a time of increasing androgyny for men. Although this sample might be considered hegemonic by virtue of a lifetime of relatively good physical ability, relative wealth, education, and privileged ethnic status, this privilege enables an understanding of how aging might impact hegemonic masculinity. Overall, it lends support to a capabilities approach that emphasise what men can do, rather than what they have lost. Perhaps this could be understood as a masculine capabilities approach. For men in A/ NZ, this involves continuing, as much as possible, with masculine activities that have been important for them. The continuation of these activities, and the ways in which men talked about them, emphasised such ideals as skill, respect, and usefulness. Aspects of this research also attempted to provide a critical analysis of the ways in which masculinity is constructed. The balancing of more traditional gendered discourses (e.g. women as ‘catty’) with more egalitarian approaches reveals that hybridisation as a process related to hegemonic masculinity occurs into older age – and may be an important component of retaining one’s sense of masculinity through adhering to notions of difference as one ages.

The limitation of breadth might also be considered a strength in terms of generating ideas for future research. For instance, comparative studies might explore further the extent to which masculinities, as opposed to femininities influence the extent to which aging is seen as a challenge or a threat. Likewise, do women value seek to continue previous activities to a similar extent as men? Although there were suggestions of the ways in which men’s sense of

masculinity might be stymied by newfound caregiving roles, more research might explore in more depth how caregiving in older age challenges men. A focus on more ‘subordinated’ masculinities, such as aging gay men, disabled men, or men of different ethnic background may also work to challenge the assumptions made in this research based on the privileged sample.

## References

- Achenbaum, W. A., & Bengtson, V. L. (1994). Re-engaging the disengagement theory of aging: On the history and assessment of theory development in gerontology. *The Gerontologist*, 34(6), 756–763.
- Adams, K. B., Roberts, A. R., & Cole, M. B. (2011). Changes in activity and interest in the third and fourth age: Associations with health, functioning and depressive symptoms. *Occupational Therapy International*, 18(1), 4–17.
- Addis, M. E., & Mahalik, J. R. (2003). Men, masculinity, and the contexts of help seeking. *American Psychologist*, 58(1), 5. <https://doi.org/http://dx.doi.org/10.1037/0003-066X.58.1.5>
- Addis, M. E., & Schwab, J. R. (2013). Theory and research on gender are always precarious. *Psychology of Men & Masculinity*, 14(2), 114.
- Agahi, N., Ahacic, K., & Parker, M. G. (2006). Continuity of leisure participation from middle age to old age. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 61(6), 340–346.
- Al-Amoudi, I., & Willmott, H. (2011). Where constructionism and critical realism converge: Interrogating the domain of epistemological relativism. *Organization Studies*, 32(1), 27–46. <https://doi.org/10.1177/0170840610394293>
- Albert, M. S., Jones, K., Savage, C. R., Berkman, L., Seeman, T., Blazer, D., & Rowe, J. W. (1995). Predictors of cognitive change in older persons: MacArthur studies of successful aging. *Psychology and Aging*, 10(4), 578–589.
- Aléx, L., Hammarström, A., Norberg, A., & Lundman, B. (2008). Construction of masculinities among men aged 85 and older in the north of Sweden. *Journal of Clinical Nursing*, 17(4), 451–459. <https://doi.org/10.1111/j.1365-2702.2007.01961.x>
- Alpass, F. M., & Neville, S. (2003). Loneliness, health and depression in older males. *Aging & Mental Health*, 7(3), 212–216. <https://doi.org/10.1080/1360786031000101193>
- Anderson, E. (2007). Inclusive masculinity in a fraternal setting. *Men and Masculinities*,

- 10(5), 604–620. <https://doi.org/10.1177/1097184X06291907>
- Arber, S., Davidson, K., & Ginn, J. (2003). *Gender and ageing: Changing roles and relationships*. McGraw-Hill Education (UK).
- Archer, M. (2000). *Being human: The problem of agency*. Cambridge University Press.
- Arrowsmith, J., Carr, S. C., Haar, J., Jones, H., Parker, J., & Yao, C. (2017). From Working Poverty to Sustainable Livelihood: What can Applied Psychology Offer? In C. Van Ommen, S. Groot, B. Masters-Awatere, & N. Tassell-Matamua (Eds.), *Precarity Uncertain, Insecure and Unequal Lives in Aotearoa New Zealand*, (pp. 37–47). Massey University Press.
- Aspin, C., & Hutchings, J. (2010). *Culture, Health & Sexuality Reclaiming the past to inform the future: Contemporary views of Maori sexuality*.  
<https://doi.org/10.1080/13691050701195119>
- Atchley, R. C. (1971). Retirement and leisure participation: Continuity or crisis? *The Gerontologist*, 11(1), 13–17.
- Atchley, R. C. (1989). A continuity theory of normal aging. *The Gerontologist*, 29(2), 183–190.
- Ball, C., Creedy, J., & Scobie, G. (2015). *Long-run fiscal projections under uncertainty: The case of New Zealand*.  
[http://researcharchive.vuw.ac.nz/xmlui/bitstream/handle/10063/4756/Working paper.pdf?sequence=1](http://researcharchive.vuw.ac.nz/xmlui/bitstream/handle/10063/4756/Working%20paper.pdf?sequence=1)
- Ball, C., Creedy, J., & Scobie, G. (2016). How uncertain are long-run fiscal projections? Non-parametric stochastic modelling for New Zealand. *Australian Economic Review*, 49(1), 59–76. <https://doi.org/10.1111/1467-8462.12140>
- Ballard-Reisch, D., & Elton, M. (1992). Gender orientation and the Bem Sex Role Inventory: A psychological construct revisited. *Sex Roles*, 27(5–6), 291–306.
- Baltes, M. M., & Carstensen, L. L. (1996). The process of successful ageing. *Ageing and Society*, 16(4), 397–422. <https://doi.org/10.1017/S0144686X00003603>
- Baltes, M. M., & Carstensen, L. L. (2003). The process of successful aging: Selection, optimization, and compensation. In U. M. Staudinger & U. Lindenberger (Eds.), *Understanding human development* (pp. 81–104). Springer US.  
[https://doi.org/10.1007/978-1-4615-0357-6\\_5](https://doi.org/10.1007/978-1-4615-0357-6_5)
- Baltes, P. B., & Baltes, M. M. (1990). Psychological perspectives on successful aging: The model of selective optimization with compensation. *Successful Aging: Perspectives from the Behavioral Sciences*, 1(1), 1–34.

- Baltes, P. B., & Smith, J. (2003). New frontiers in the future of aging: From successful aging of the young old to the dilemmas of the fourth age. *Gerontology*, 49(2), 123–135.
- Bannister, M. (2005). Kiwi blokes: Recontextualising white New Zealand masculinities in a global setting. *Genders Online*, 42.
- Bano, B., & Benbow, S. (2010). Positive approaches to the fourth age. *Quality in Ageing and Older Adults*, 11(2), 29–34.
- Barnes, S. F. (2011). *Third age: The golden years of adulthood*.  
<http://calbooming.sdsu.edu/documents/TheThirdAge.pdf>.
- Barrett, F. J. (1996). The organizational construction of hegemonic masculinity: The case of the US Navy. *Gender, Work and Organization*, 3(3), 129–142.  
<https://doi.org/10.1111/j.1468-0432.1996.tb00054.x>
- Bascand, G., & Dunstan, K. (2014). New Zealand's demographics and population ageing. *New Zealand Economic Papers*, 48(2), 129–138.
- Beaglaioich, C. Ó., Sarma, K. M., & Morrison, T. G. (2014). New directions in gender role conflict research. In J. Gelfer (Ed.), *Masculinities in a Global Era* (pp. 17–51). Springer.
- Beasley, C. (2012). Problematizing contemporary men/masculinities theorizing: The contribution of Raewyn Connell and conceptual-terminological tensions today. *The British Journal of Sociology*, 63(4), 747–765. <https://doi.org/10.1111/j.1468-4446.2012.01435.x>
- Beasley, C. (2013). Mind the gap? Masculinity Studies and contemporary gender/sexuality thinking. *Australian Feminist Studies*, 28(75), 108–124.  
<https://doi.org/10.1080/08164649.2013.761949>
- Beck, U. (1992). *Risk society: Towards a new modernity*. Sage.
- Beck, U. (2004). Cosmopolitical realism: On the distinction between cosmopolitanism in philosophy and the social sciences. *Global Networks*, 4(2), 131–156.  
<https://doi.org/10.1111/j.1471-0374.2004.00084.x>
- Becker, C. B., Diedrichs, P. C., Jankowski, G., & Werchan, C. (2013). I'm not just fat, I'm old: has the study of body image overlooked "old talk"? *Journal of Eating Disorders*, 1(1), 1–12.
- Becker, G. (1993). Continuity after a stroke: Implications of life-course disruption in old age. *The Gerontologist*, 33(2), 148–158.
- Bekhet, A. K., & Zauszniewski, J. A. (2012). Mental health of elders in retirement communities: is loneliness a key factor? *Archives of Psychiatric Nursing*, 26(3), 214–224.

- Bem, S. L., & Lewis, S. A. (1975). Sex role adaptability: One consequence of psychological androgyny. *Journal of Personality and Social Psychology*, 31(4), 634–643.
- Bengtson, V. L., Rice, C. J., & Johnson, M. L. (1999). Are theories of ageing important? Models and explanations in gerontology at the turn of the century. In Vern L. Bengtson & K. W. Schaie (Eds.), *Handbook of theories of aging* (pp. 3–30). Springer.
- Bennett, K. M. (2007). “No sissy stuff”: Towards a theory of masculinity and emotional expression in older widowed men. *Journal of Aging Studies*, 21(4), 347–356.
- Bhaskar, R. (1986). *Scientific Realism and Human Emancipation*. Verso.
- Blundo, R., & Bowen, D. E. (2005). Aging and older men: thoughts, reflections and issues: introduction. *Journal of Sociology and Social Welfare*, 32, 3–7.
- Bonnet, F., Irving, K., Terra, J.-L., Nony, P., Berthezène, F., & Moulin, P. (2005). Anxiety and depression are associated with unhealthy lifestyle in patients at risk of cardiovascular disease. *Atherosclerosis*, 178, 339–344.  
<https://doi.org/10.1016/j.atherosclerosis.2004.08.035>
- Boudiny, K. (2013). ‘Active ageing’: from empty rhetoric to effective policy tool. *Ageing and Society*, 33(06), 1077–1098. <https://doi.org/10.1017/S0144686X1200030X>
- Bourdieu, P. (1977). *Outline of a Theory of Practice* (Vol. 16). Cambridge University Press.
- Bourdieu, P. (2011). The forms of capital (1986). In I. Szeman & T. Kaposy (Eds.), *Cultural theory: An anthology* (pp. 81–93). John Wiley & Sons.
- Bowling, A. (2008). Enhancing later life: How older people perceive active ageing? *Aging and Mental Health*, 12(3), 293–301. <https://doi.org/10.1080/13607860802120979>
- Boyd, A., Van de Velde, S., Vilagut, G., De Graaf, R., Florescu, S., & Alonso, J. (2005). Gender differences in mental disorders and suicidality in Europe: Results from a large cross-sectional population-based study. *Journal of Affective Disorders*, 173, 245–254.
- Brady, A. (2012). The transgendered Kiwi: Homosocial desire and ‘New Zealand identity.’ *Sexualities*, 15(3–4), 355–372.
- Braidotti, R. (2005). A critical cartography of feminist post-postmodernism. *Australian Feminist Studies*, 20(47), 169–180. <https://doi.org/10.1080/08164640500090319>
- Branney, P., & White, A. (2008). Big boys don’t cry: Depression and men. *Advances in Psychiatric Treatment*, 14(4), 256–262. <https://doi.org/10.1192/apt.bp.106.003467>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- Braun, V., & Clarke, V. (2012). Thematic analysis. In H. Cooper, P. M. Camic, D. L. Long, A. T. Panter, D. Rindskopf, & K. J. Sher (Eds.), *APA handbook of research methods in*

- Psychology, Vol 2: research designs: Quantitative, qualitative, neuropsychological, and biological.* (pp. 57–71). American Psychological Association.  
<https://doi.org/10.1037/13620-004>
- Braun, V., & Clarke, V. (2019). Reflecting on reflexive thematic analysis. In *Qualitative Research in Sport, Exercise and Health* (Vol. 11, Issue 4, pp. 589–597). Routledge.  
<https://doi.org/10.1080/2159676X.2019.1628806>
- Brickell, C. (2005). Masculinities, performativity, and subversion: A sociological reappraisal. *Men and Masculinities*, 8(1), 24–43.
- Bridges, T., & Pascoe, C. J. (2014). Hybrid masculinities: New directions in the sociology of men and masculinities. *Sociology Compass*, 8(3), 246–258.  
<https://doi.org/10.1111/soc4.12134>
- Brittan, A. (1989). *Masculinity and Power*. Cassell.
- Bryant, J., Teasdale, A., Tobias, M., Cheung, J., & McHugh, M. (2004). Population ageing and government health expenditures in New Zealand, 1951–2051. In *NZ Treasury Working Paper* (Vol. 4).
- Buchbinder, D. (2002). Unruly age: representing the aging male body. In V. M. S. Pearce (Ed.), *Manning the next millennium* (pp. 11–28). Black Swan Press.
- Buckley, J., & Ó Tuama, S. (2010). ‘I send the wife to the doctor’- Men’s behaviour as health consumers. *International Journal of Consumer Studies*, 34(5), 587–595.  
<https://doi.org/10.1111/j.1470-6431.2010.00908.x>
- Burbank, P. M. (2013). Psychosocial theories of aging. *Advances in Nursing Science*, 9(1), 73–86. <https://doi.org/10.1097/00012272-198610000-00009>
- Burr, V. (2003). *Introduction to Social Constructionism* (Vol. 2). Routledge.
- Burr, V. (1995). *An Introduction to social constructionism*. Routledge.  
<http://eprints.hud.ac.uk/id/eprint/2862/>
- Butler, J. (1990). *Gender trouble and the subversion of identity*. Routledge.
- Butler, J. (1993). *Bodies that matter: On the discursive limits of sex*. Routledge.  
<https://doi.org/10.4324/9780203828274>
- Buys, L., Roberto, K. A., Miller, E., & Blieszner, R. (2008). Prevalence and predictors of depressive symptoms among rural older Australians and Americans. *Australian Journal of Rural Health*, 16(1), 33–39.
- Calasanti, T. (2005). Ageism, gravity, and gender: Experiences of aging bodies. *Generations*, 29(3), 8–12.
- Calasanti, T., & King, N. (2005). Firming the floppy penis: Age, class, and gender relations

- in the lives of old men. *Men and Masculinities*, 8(1), 3–23.  
<https://doi.org/10.1177/1097184X04268799>
- Calasanti, T., & King, N. (2007). “Beware of the estrogen assault”: Ideals of old manhood in anti-aging advertisements. *Journal of Aging Studies*, 21(4), 357–368.
- Calasanti, T., Pietilä, I., Ojala, H., & King, N. (2013). Men, bodily control, and health behaviors: the importance of age. *Health Psychology*, 32(1), 15.
- Calasanti, T., & Slevin, K. F. (2001). *Gender, social inequalities, and aging*. AltaMira Press.
- Campbell, F. K. (2014). Ableism as a Transformative Practice. In C. Cocker & T. Hafford-Letchfield (Eds.), *Rethinking anti-discriminatory and anti-oppressive theories for social work practice* (pp. 78–92). Palgrave Macmillan.
- Campbell, H., Bell, M. M., & Finney, M. (2006). *Country boys: Masculinity and rural life*. Pennsylvania State University Press.
- Campbell, H. (2000). The glass phallus: Pub (lic) masculinity and drinking in rural New Zealand. *Rural Sociology*, 65(4), 562–581. <https://doi.org/10.1111/j.1549-0831.2000.tb00044.x>
- Canham, S. L. (2009). The interaction of masculinity and control and its impact on the experience of suffering for an older man. *Journal of Aging Studies*, 23(2), 90–96.
- Carr, S. C., Maleka, M., Meyer, I., Barry, M. L., Haar, J., Parker, J., Arrowsmith, J., Yao, C., Hodgetts, D., Jones, H., Young-Hausner, A., Afeaki-Mafile’o, E., Rasmussen, A. H., Alefaio-Tugia, S., Falealili, B., Mafile’o, K., Pikula, T., Wolfgramm, N., Uhila, H., ... Naithani, A. (2018). How can wages sustain a living? By getting ahead of the curve. *Sustainability Science*, 13(4), 901–917. <https://doi.org/10.1007/s11625-018-0560-7>
- Cecil, R., McCaughan, E., & Parahoo, K. (2010). ‘It’s hard to take because I am a man’s man’: An ethnographic exploration of cancer and masculinity. *European Journal of Cancer Care*, 19(4), 501–509.
- Chambre, S. M. (1984). Is volunteering a substitute for role loss in old age? An empirical test of activity theory. *The Gerontologist*, 24(3), 292–298.
- Chapman, S. A. (2005). Theorizing about aging well: Constructing a narrative. *Canadian Journal on Aging/La Revue Canadienne Du Vieillissement*, 24(1), 9–18.
- Chapple, A., & Ziebland, S. (2002). Prostate cancer: embodied experience and perceptions of masculinity. *Sociology of Health & Illness*, 24(6), 820–841.
- Charise, A. (2012). ‘Let the reader think of the burden’: Old age and the crisis of capacity. *Occasion: Interdisciplinary Studies in the Humanities*, 4(31.5).
- Christensen, A.-D., & Jensen, S. Q. (2014). Combining hegemonic masculinity and

- intersectionality. *NORMA: International Journal for Masculinity Studies*, 9(1), 60–75.  
<https://doi.org/10.1080/18902138.2014.892289>
- Clarke, L. H., Bennett, E. V., & Liu, C. (2014). Aging and masculinity: Portrayals in men's magazines. *Journal of Aging Studies*, 31, 26–33.
- Clarkson, J. (2005). Contesting masculinity's makeover: Queer Eye, consumer masculinity, and "straight-acting" gays. *Journal of Communication Inquiry*, 29(3), 235–255.  
<https://doi.org/10.1177/0196859905275234>
- Cleary, A. (2005). Death rather than disclosure: Struggling to be a real man. *Irish Journal of Sociology*, 14(2), 155–176. <https://doi.org/10.1177/079160350501400209>
- Cleary, A. (2012). Suicidal action, emotional expression, and the performance of masculinities. *Social Science & Medicine*, 74(4), 498–505.
- Cochran, S. V. (2005). Assessing and treating depression in men. In G. E. Good & G. R. Brooks (Eds.), *The new handbook of psychotherapy and counseling with men: A comprehensive guide to settings, problems, and treatment approaches, Rev. & abridged ed* (pp. 121–133). Jossey-Bass.
- Cochran, S. V. (2010). Emergence and development of the psychology of men and masculinity. In J. C. Chrisler & D. R. McCreary (Eds.), *Handbook of gender research in psychology* (pp. 43–58). Springer.
- Collier, R. (1998). *Masculinities, crime and criminology*. Sage.
- Connell, R. W. (1995). *Masculinities*. Beverley: University of California Press. Consult, 20.
- Connell, R. W. (1985). Theorising Gender. *Sociology*, 19(2), 260–272.  
<https://doi.org/10.1177/0038038585019002008>
- Connell, R. W. (1995). *Masculinities*. Polity Press.
- Connell, R. W. (2000). Teaching the Boys. In R. W. Connell (Ed.), *The men and the boys* (pp. 148–176). Polity. <https://www.mendeley.com/catalogue/teaching-boys/>
- Connell, R. W. (2005). *Masculinities*. Univ of California Press.
- Connell, R. W. (2010). Understanding neoliberalism. In M. Luxton & S. Braedley (Eds.), *Neoliberalism and everyday life* (pp. 22–36). McGill-Queen's University Press.
- Connell, R. W., & Messerschmidt, J. W. (2005). Hegemonic masculinity: Rethinking the concept. *Gender & Society*, 19(6), 829–859. <https://doi.org/10.1177/0891243205278639>
- Connery, H., & Davidson, K. M. (2006). A survey of attitudes to depression in the general public: A comparison of age and gender differences. *Journal of Mental Health*, 15(2), 179–189. <https://doi.org/10.1080/09638230600608818>
- Constantinople, A. (1973). Masculinity-femininity: An exception to a famous dictum?



- Psychological Bulletin*, 80(5), 389–407. <http://www.ncbi.nlm.nih.gov/pubmed/4147970>
- Cosgrove, A., & Bruce, T. (2005). “The way New Zealanders would like to see themselves”: Reading white masculinity via media coverage of the death of Sir Peter Blake. *Sociology of Sport Journal*, 22(3), 336–355. <https://doi.org/10.1123/ssj.22.3.336>
- Coulson, C. E., Williams, L. J., Berk, M., Lubman, D. I., Quirk, S. E., & Pasco, J. A. (2014). *Association between alcohol consumption and self-reported depression among elderly Australian men*. <https://doi.org/10.1016/j.gmh.2014.09.001>
- Courtenay, W. H. (2000). Constructions of masculinity and their influence on men’s well-being: a theory of gender and health. *Social Science & Medicine*, 50(10), 1385–1401. [https://doi.org/doi:10.1016/S0277-9536\(99\)00390-1](https://doi.org/doi:10.1016/S0277-9536(99)00390-1)
- Crawshaw, P. (2007). Governing the healthy male citizen: Men, masculinity and popular health in Men’s Health magazine. *Social Science & Medicine*, 65(8), 1606–1618.
- Creighton, G., & Oliffe, J. L. (2010). Theorizing masculinities and men’s health: A brief history with a view to practice. *Health Sociology Review*, 19(4), 409–418. <https://doi.org/10.5172/hesr.2010.19.4.409>
- Crotty, M. (1998). *The foundations of social research: Meaning and perspective in the research process*. Sage.
- Cruickshank, J. (2012). Positioning positivism, critical realism and social constructionism in the health sciences: a philosophical orientation. *Nursing Inquiry*, 19(1), 71–82. <https://doi.org/10.1111/j.1440-1800.2011.00558.x>
- Cuddy, A. J. C., Wolf, E. B., Glick, P., Crotty, S., Chong, J., & Norton, M. I. (2015). Men as cultural ideals: Cultural values moderate gender stereotype content. *Journal of Personality and Social Psychology*, 109(4), 622–635. <https://doi.org/10.1037/pspi0000027>
- Cukrowicz, K. C., Cheavens, J. S., Van Orden, K. A., Ragain, R. M., & Cook, R. L. (2011). Perceived burdensomeness and suicide ideation in older adults. *Psychology and Aging*, 26(2), 331–338. <https://doi.org/10.1037/a0021836>
- Cumming, E. (1964). New thoughts on the theory of disengagement. In R. Kastenbaum (Ed.), *New thoughts on old age* (pp. 3–18). Springer.
- Cumming, E., Dean, L., Newell, D., & McCaffrey, I. (1960). Disengagement- A tentative theory of aging. *Sociometry*, 23(1), 23–35.
- Cumming, E., & Henry, W. E. (1961). *Growing old, the process of disengagement*. Basic Books.
- Cushman, P. (2008). So what exactly do you want? What principals mean when they say

- ‘male role model.’ *Gender and Education*, 20(2), 123–136.
- Davidson, K. (2004). “Why can’t a man be more like a woman?”: Marital status and social networking of older men. *The Journal of Men’s Studies*, 13(1), 25–43.
- De Beauvoir, S., & O’Brian, P. (1996). *The coming of age*. WW Norton & Company.
- de Visser, R. O., & McDonnell, E. J. (2013). “Man points”: Masculine capital and young men’s health. *Health Psychology*, 32(1), 5.
- De Visser, R. O., Smith, J. A., & McDonnell, E. J. (2009). ‘That’s not masculine:’ Masculine capital and health-related behaviour. *Journal of Health Psychology*, 14(7), 1047–1058. <https://doi.org/10.1177/1359105309342299>
- Demetriou, D. Z. (2001). Connell’s concept of hegemonic masculinity: A critique. *Theory and Society*, 30(3), 337–361.
- Deutsch, F. M. (2007). Undoing gender. *Gender & Society*, 21(1), 106–127.
- Donaldson, M. (1993). What is hegemonic masculinity? *Theory and Society*, 22(5), 643–657. <https://doi.org/10.1007/BF00993540>
- Dowd, J. J. (1975). Aging as exchange: A preface to theory. *Journal of Gerontology*, 30(5), 584–594.
- Dreyfus, H. L., & Rabinow, P. (2014). *Michel Foucault: Beyond structuralism and hermeneutics*. University of Chicago Press.
- Drummond, M. J. N. (2003). Retired men, retired bodies. *International Journal of Men’s Health*, 2(3), 183.
- Duay, D. L., & Bryan, V. C. (2006). Senior adults’ perceptions of successful aging. *Educational Gerontology*, 32(6), 423–445.
- Edley, N., & Wetherell, M. (2014). Roles, roots, and rifts: A rejoinder to Mahalik, Silverstein, and Hammond. *Psychology of Men & Masculinity*, 15(4), 375–376. <https://doi.org/http://dx.doi.org.ezproxy.massey.ac.nz/10.1037/a0038008>
- Eisler, R. M., & Blalock, J. A. (1991). Masculine gender role stress: Implications for the assessment of men. *Clinical Psychology Review*, 11(1), 45–60.
- Ekerdt, D. J. (1986). The busy ethic: Moral continuity between work and retirement. *The Gerontologist*, 26(3), 239–244. <https://doi.org/10.1093/geront/26.3.239>
- Emslie, C., Hunt, K., & O’Brien, R. (2004). Masculinities in older men: A qualitative study in the west of Scotland. *The Journal of Men’s Studies*, 12(3), 207–226.
- Emslie, C., Ridge, D., Ziebland, S., & Hunt, K. (2006). Men’s accounts of depression: Reconstructing or resisting hegemonic masculinity? *Social Science & Medicine*, 62(9), 2246–2257. <https://doi.org/10.1016/j.socscimed.2005.10.017>

- Ervin, M. (2011). The might of the metrosexual: How a mere marketing tool challenges hegemonic masculinity. *The 21st Century Man in Popular Culture: Performing American Masculinities*, 58–75.
- Evans, A., Riley, S., & Shankar, A. (2010). Technologies of sexiness: Theorizing women's engagement in the sexualization of culture. *Feminism & Psychology*, 20(1), 114–131.
- Evans, J., Frank, B., Oliffe, J. L., & Gregory, D. (2011). Health, illness, men and masculinities (HIMM): A theoretical framework for understanding men and their health. *Journal of Men's Health*, 8(1), 7–15.
- Everard, K. M., Lach, H. W., Fisher, E. B., & Baum, M. C. (2000). Relationship of activity and social support to the functional health of older adults. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 55(4), 208–212.
- Faludi, S. (1991). *Backlash: The undeclared war against American women*. Three Rivers Press.
- Fergus, K. D., Gray, R. E., & Fitch, M. I. (2002). Sexual dysfunction and the preservation of manhood: Experiences of men with prostate cancer. *Journal of Health Psychology*, 7(3), 303–316.
- Ferguson, G. (2000). *You'll be a man if you play rugby*. University of Canterbury.
- Fineman, S. (2014). Age matters. *Organization Studies*, 35(11), 1719–1723.
- Fingerman, K. L., Pillemer, K. A., Silverstein, M., & Sutor, J. J. (2012). The baby boomers' intergenerational relationships. *The Gerontologist*, 52(2), 199–209.
- Finlay, L., & Gough, B. (Eds.). (2003). *Reflexivity*. Blackwell Science Ltd.  
<https://doi.org/10.1002/9780470776094>
- Fleming, A. A. (1999). Older men in contemporary discourses on ageing: Absent bodies and invisible lives. *Nursing Inquiry*, 6(1), 3–8.
- Foster, L., & Walker, A. (2015). Active and successful aging: A European policy perspective. In *Gerontologist* (Vol. 55, Issue 1, pp. 83–90). Oxford University Press.  
<https://doi.org/10.1093/geront/gnu028>
- Foucault, M. (1972). *The archaeology of knowledge and the discourse on language* (A. M. S. Smith (Ed.)). Pantheon.
- Foucault, M. (1980). *Power/knowledge: Selected interviews and other writings, 1972-1977* (C. Gordon (Ed.)). Pantheon.
- Foucault, M. (1995). *Discipline and punish: The birth of the prison* (2nd ed.). Vintage Books.
- Foucault, M. 1977 [1976]. (2001). La Fonction Politique de l'Intellectuel. In D. Defert & F. Ewald (Eds.), *Dits et Écrits vol.II: 1976–1988*. (pp. 109–114). Gallimard. Trans. C.

- Gordon 1977 The Political Function of the Intellectual. *Radical Philosophy* 17(Summer 1977) 12–14.
- Foucault, M., & Hurley, R. (1978). *The history of sexuality. Volume 1: An introduction*. Vintage Books.
- Fournier, V., & Smith, W. (2006). Scripting masculinity. *Ephemera*, 6(2), 140–161.  
www.ephemeraweb.org
- Franklin, N. C., & Tate, C. A. (2009). Lifestyle and successful aging: An overview. *American Journal of Lifestyle Medicine*, 3(1), 6–11.
- Freund, A. M., & Baltes, P. B. (1998). Selection, optimization, and compensation as strategies of life management: Correlations with subjective indicators of successful aging. *Psychology and Aging*, 13(4), 531–543. <https://doi.org/10.1037/0882-7974.13.4.531>
- Fry, P. S. (1992). Major social theories of aging and their implications for counseling concepts and practice: A critical review. *The Counseling Psychologist*, 20(2), 246–329.
- Galdas, P. M., Cheater, F., & Marshall, P. (2005). Men and health help-seeking behaviour: Literature review. *Journal of Advanced Nursing*, 49(6), 616–623.  
<https://doi.org/10.1111/j.1365-2648.2004.03331.x>
- Gee, S., & Jackson, S. J. (2012). Leisure corporations, beer brand culture, and the crisis of masculinity: The Speight's 'Southern Man' advertising campaign. *Leisure Studies*, 31(1), 83–102. <https://doi.org/10.1080/02614367.2011.566625>
- George, A., & Fleming, P. (2004). Factors affecting men's help-seeking in the early detection of prostate cancer: Implications for health promotion. *Journal of Men's Health and Gender*, 1(4), 345–352. <https://doi.org/10.1016/j.jmhg.2004.10.009>
- Gergen, K. J., & Gergen, M. M. (2008). Social construction and psychological inquiry. In J. A. Holstein & J. F. Gubrium (Eds.), *Handbook of constructionist research* (pp. 171–188). Guilford Press.
- Gill, R. (2011). Sexism reloaded, or, it's time to get angry again! *Feminist Media Studies*, 11(01), 61–71. <https://doi.org/10.1080/14680777.2011.537029>
- Gill, R. (2016). Post-postfeminism?: New feminist visibilities in postfeminist times. *Feminist Media Studies*, 16(4), 610–630. <https://doi.org/10.1080/14680777.2016.1193293>
- Gilleard, C., & Higgs, P. (2002). The third age: Class, cohort or generation? *Ageing and Society*, 22(03), 369–382.
- Gilleard, C., & Higgs, P. (2010). Aging without agency: Theorizing the fourth age. *Aging & Mental Health*, 14(2), 121–128.

- Gilleard, C., & Higgs, P. (2011). Ageing abjection and embodiment in the fourth age. *Journal of Aging Studies*, 25(2), 135–142.
- Gilleard, C., & Higgs, P. (2013). The fourth age and the concept of a ‘social imaginary’: A theoretical excursus. *Journal of Aging Studies*, 27(4), 368–376.
- Gilleard, C., Higgs, P., Hyde, M., Wiggins, R., & Blane, D. (2005). Class, cohort, and consumption: The British experience of the third age. *Journals of Gerontology - Series B Psychological Sciences and Social Sciences*, 60(6).  
<https://doi.org/10.1093/geronb/60.6.S305>
- Glass, T. A., Seeman, T. E., Herzog, A. R., Kahn, R., & Berkman, L. F. (1995). Change in productive activity in late adulthood: MacArthur studies of successful aging. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 50(2), 65–76.
- Gleibs, I. H., Haslam, C., Jones, J. M., Alexander Haslam, S., McNeill, J., & Connolly, H. (2011). No country for old men? The role of a ‘Gentlemen’s Club’ in promoting social engagement and psychological well-being in residential care. *Aging & Mental Health*, 15(4), 456–466.
- Goodley, D., & Runswick-Cole, K. (2013). Disability: Crippling men, Masculinities and Methodologies. In B. Pini & B. Pease (Eds.), *Men, Masculinities, and Methodologies* (pp. 142–156). Palgrave Macmillan.
- Gott, M., & Hinchliff, S. (2003). How important is sex in later life? The views of older people. *Social Science & Medicine*, 56(8), 1617–1628.
- Gough, B. (2018). *Contemporary masculinities: Embodiment, emotion and wellbeing*. Palgrave Pivot.
- Gough, Brendan. (2006). Try to be healthy, but don’t forgo your masculinity: Deconstructing men’s health discourse in the media. *Social Science & Medicine*, 63(9), 2476–2488.  
<https://doi.org/10.1016/j.socscimed.2006.06.004>
- Gough, Brendan. (2007). ‘Real men don’t diet’: An analysis of contemporary newspaper representations of men, food and health. *Social Science & Medicine*, 64(2), 326–337.
- Gough, Brendan. (2013). The psychology of men’s health: Maximizing masculine capital. *Health Psychology*, 32(1), 1–4. <https://doi.org/10.1037/a0030424>
- Gough, Brendan, Seymour-Smith, S., & Matthews, C. R. (2016). Body dissatisfaction, appearance investment, and wellbeing: How older obese men orient to "aesthetic health". *Psychology of Men & Masculinity*, 17(1), 84.
- Gramsci, A. (1971). *Selections from the Prison Notebooks* (G. N. Smith (Ed.)). International.

- Griffith, D. M. (2012). An intersectional approach to men's health. *Journal of Men's Health*, 9(2), 106–112.
- Groeschel, B. L., Wester, S. R., & Sedivy, S. K. (2010). Gender role conflict, alcohol, and help seeking among college men. *Psychology of Men & Masculinity*, 11(2), 123.
- Gross, G., & Blundo, R. (2005). Viagra: Medical technology constructing aging masculinity. *Journal of Sociology and Social Welfare*, 32(1), 85-98.
- Gubrium, J. F. (1972). Toward a socio-environmental theory of aging. *The Gerontologist*, 12(3 Part 1), 281–284.
- Guest, R. (2014). Population ageing and productivity: A survey with implications for New Zealand. *New Zealand Economic Papers*, 48(2), 153–168.
- Gullette, M. M. (1997). *Declining to decline: Cultural combat and the politics of the midlife*. University of Virginia Press.
- Hall, C., Brown, A., Gleeson, S., & Zinn, J. (2007). Keeping the thread: older men's social networks in Sydney, Australia. *Quality in Ageing and Older Adults*, 8(4), 10–17.
- Hall, M., & Gough, B. (2011). Magazine and reader constructions of 'metrosexuality' and masculinity: A membership categorisation analysis. *Journal of Gender Studies*, 20(01), 67–86. <https://doi.org/10.1080/09589236.2011.542023>
- Hallgren, M., Herring, M. P., Owen, N., Dunstan, D., Ekblom, Ö., Helgadottir, B., Nakitanda, O. A., & Forsell, Y. (2016). Exercise, physical activity, and sedentary behavior in the treatment of depression: Broadening the scientific perspectives and clinical opportunities. *Frontiers in Psychiatry*, 7(MAR). <https://doi.org/10.3389/fpsy.2016.00036>
- Hamad, H. (2014). Paternalising the rejuvenation of later life masculinity in twenty- first century film. In I. Whelehan & J. Gwynne (Eds.), *Ageing, popular culture and contemporary feminism: Harleys and hormones*. Palgrave Macmillan. <https://doi.org/10.1057/9781137376534>
- Hammond, W. P. (2014). Forests, trees, and streams: Why an integration of discursive psychological frameworks and gender role strain paradigms is needed. *Psychology of Men & Masculinity*, 15(4), 372–374. <https://doi.org/10.1037/a0037498>
- Harding, T. (2007). The construction of men who are nurses as gay. *Journal of Advanced Nursing*, 60(6), 636–644. <https://doi.org/10.1111/j.1365-2648.2007.04447.x>
- Harré, R., Moghaddam, F. M., Cairnie, T. P., Rothbart, D., & Sabat, S. R. (2009). Recent Advances in Positioning Theory. *Theory & Psychology*, 19(1), 5–31.

<https://doi.org/10.1177/0959354308101417>

- Harris, C. (2018). *Massive gender survey shows where women dip out of leadership* | *Stuff.co.nz*. <https://www.stuff.co.nz/business/better-business/108199612/massive-gender-survey-shows-where-women-dip-out-of-leadership>
- Havighurst, R. J. (1968). Personality and patterns of aging. *The Gerontologist*, 8(1), 20–23.
- Havighurst, R. J., & Albrecht, R. (1953). *Older people*. Longmans.
- Heartfield, J. (2002). There is no masculinity crisis. *Genders*, 35, 1–15.
- Heckhausen, J., & Schulz, R. (1993). Optimisation by selection and compensation: Balancing primary and secondary control in life span development. *International Journal of Behavioral Development*, 16(2), 287–303. <https://doi.org/10.1177/016502549301600210>
- Heckhausen, J., Wrosch, C., & Schulz, R. (2010). A motivational theory of life-span development. *Psychological Review*, 117(1), 32–60. <https://doi.org/10.1037/a0017668>
- Higgs, P. F. (2010). The natural, the normal and the normative: Contested terrains in ageing and old age. In *Social Science & Medicine* (Vol. 71, pp. 1513–1519).
- Higgs, P., & McGowan, F. (2013). Aging, embodiment and the negotiation of the third and fourth ages. *Aging Men, Masculinities and Modern Medicine*, 21–34.
- Himmelstein, M. S., & Sanchez, D. T. (2016a). Masculinity in the doctor's office: Masculinity, gendered doctor preference and doctor-patient communication. *Preventive Medicine*, 84, 34–40. <https://doi.org/10.1016/j.ypmed.2015.12.008>
- Himmelstein, M. S., & Sanchez, D. T. (2016b). Masculinity impediments: Internalized masculinity contributes to healthcare avoidance in men and women. *Journal of Health Psychology*, 21(7), 1283–1292. <https://doi.org/10.1177/1359105314551623>
- Hochschild, A. R. (1975). Disengagement theory: A critique and proposal. *American Sociological Review*, 553–569.
- Hokowhitu, B. (2003). Maori masculinity, post-structuralism, and the emerging self. *New Zealand Sociology*, 18(2), 179–201.
- Hokowhitu, B. (2004). Manawa whenua, wē moana uriuri, hōkikitanga kawenga: Tackling Māori Masculinity: A Colonial Genealogy of Savagery and Sport. *The Contemporary Pacific*, 16(2), 259–284. <http://eprintstetumu.otago.ac.nz>
- Holliday, R., & Cairnie, A. (2007). Man made plastic: Investigating men's consumption of aesthetic surgery. *Journal of Consumer Culture*, 7(1), 57–78.
- Holmes, J., Marra, M., & Lazzaro-Salazar, M. (2017). Negotiating the tall poppy syndrome in New Zealand workplaces: Women leaders managing the challenge. *Gender and Language*, 11(1), 1–29. <https://doi.org/10.1558/genl.31236>

- Hook, D. (2007). Discourse, knowledge, materiality, history: Foucault and discourse analysis. In *Foucault, psychology and the analytics of power* (pp. 100–137). Palgrave Macmillan.
- House, J. S., Landis, K. R., & Umberson, D. (1988). Social relationships and health. *Science*, 241(4865), 540.
- Howson, R. (2008). Hegemonic masculinity in the theory of hegemony. *Men and Masculinities*, 11(1), 109–113. <https://doi.org/10.1177/1097184X08315105>
- Hoyt, D. R., Kaiser, M. A., Peters, G. R., & Babchuk, N. (1980). Life satisfaction and activity theory: A multidimensional approach. *Journal of Gerontology*, 35(6), 935–941.
- Huey, L., & Berndt, E. (2008). ‘You’ve gotta learn how to play the game’: Homeless women’s use of gender performance as a tool for preventing victimization. *The Sociological Review*, 56(2), 177–194.
- Huggins, A., Rouse, I., & Somerford, P. (1996). *A Report on Men’s Health, Western Australia, 1996*.
- Hurst, J., & Leberman, S. (2015). New Zealand women in leadership. In S. R. Madsen, F. W. Ngunjiri, K. A. Longman, & C. Cherrey (Eds.), *Women and leadership around the world*. Information Age.
- Hyde, J. S., & Phillis, D. E. (1979). Androgyny across the lifespan. *Developmental Psychology*, 15(3), 334.
- Jackson, D. (2016). *Exploring aging masculinities: The body, sexuality and social lives*. Palgrave Macmillan. <https://doi.org/10.1057/9781137527578>
- Jankowski, G. S., Diedrichs, P. C., Williamson, H., Christopher, G., & Harcourt, D. (2016). Looking age-appropriate while growing old gracefully: A qualitative study of ageing and body image among older adults. *Journal of Health Psychology*, 21(4), 550–561.
- Jefferson, T. (2002). Subordinating hegemonic masculinity. *Theoretical Criminology*, 6(1), 63–88. <https://doi.org/10.1177/136248060200600103>
- Jewell, A. J. (2014). Tornstam’s notion of gerotranscendence: Re-examining and questioning the theory. *Journal of Aging Studies*, 30(1), 112–120. <https://doi.org/10.1016/j.jaging.2014.04.003>
- Johnson, J. L., Oliffe, J. L., Kelly, M. T., Galdas, P., & Ogrodniczuk, J. S. (2012). Men’s discourses of help-seeking in the context of depression. *Sociology of Health & Illness*, 34(3), 345–361. <https://doi.org/10.1111/j.1467-9566.2011.01372.x>
- Johnson, P. C., & Goffman, E. (1976). A frame for theatre frame analysis: An essay on the organization of experience. *Educational Theatre Journal*, 28(4), 565. <https://doi.org/10.2307/3206165>



- Jones, I. R., & Higgs, P. F. (2010). The natural, the normal and the normative: Contested terrains in ageing and old age. *Social Science & Medicine*, 71, 1513–1519.
- Jones, I. R., Leontowitsch, M., & Higgs, P. (2010). The experience of retirement in second modernity generational habitus among retired senior managers. *Sociology*, 44(1), 103–120.
- Jönson, H., & Magnusson, J. A. (2001). A new age of old age?: Gerotranscendence and the re-enchantment of aging. *Journal of Aging Studies*, 15(4), 317–331.
- Jourian, T. J. (2017). Trans\*forming college masculinities: carving out trans\*masculine pathways through the threshold of dominance. *International Journal of Qualitative Studies in Education*, 30(3), 245–265. <https://doi.org/10.1080/09518398.2016.1257752>
- Kachel, S., Steffens, M. C., & Niedlich, C. (2016). Traditional masculinity and femininity: Validation of a new scale assessing gender roles. *Frontiers in Psychology*, 7, 956.
- Kalache, A., & Gatti, A. (2003). Active ageing: a policy framework. *Advances in Gerontology*, 11, 7–18. <https://doi.org/10.1080/tam.5.1.1.37>
- Katz, S. (2000). Busy bodies: Activity, aging, and the management of everyday life. *Journal of Aging Studies*, 14(2), 135–152.
- Katz, S., & Calasanti, T. (2015). Critical perspectives on successful aging: Does it “appeal more than it illuminates”? *Gerontologist*, 55(1), 26–33. <https://doi.org/10.1093/geront/gnu027>
- Kaye, J. (2009). Twenty-first-century Victorian dandy: What metrosexuality and the heterosexual matrix reveal about Victorian men. *The Journal of Popular Culture*, 42(1), 103–125. <https://doi.org/10.1111/j.1540-5931.2009.00573.x>
- Kemperman, A., Van Den Berg, P., Weijs-Perrée, M., & Uijtdewillegen, K. (2019). Loneliness of older adults: Social network and the living environment. *International Journal of Environmental Research and Public Health*, 16(3), 406. <https://doi.org/10.3390/ijerph16030406>
- Khullar, G. S., & Reynolds, B. (1990). Quality of life and activity: A test of the activity - “versus”- disengagement theories. *International Review of Modern Sociology*, 33–68.
- Kimmel, M. S. (1986). Introduction: "Toward men's studies". *The American Behavioral Scientist*, 29(5), 517–529.
- Kimmel, M. S. (1993). Invisible masculinity. *Society*, 30(6), 28–35. <https://doi.org/10.1007/BF02700272>
- Kimmel, M. S. (2005). *The history of men : Essays in the history of American and British masculinities*. State University of New York Press.

- Kimmel, M. S. (2007). *The gendered society*. Oxford University Press.
- King, N., & Calasanti, T. (2006). Empowering the old: Critical gerontology and anti-aging in a global context. In J. Baars, D. Dannefer, C. Phillipson, & A. Walker (Eds.), *Aging globalization and inequality: The new critical gerontology* (1st ed., pp. 139–157). Baywood.
- King, N., & Calasanti, T. (2013). Men's aging amidst intersecting relations of inequality. *Sociology Compass*, 7(9), 699–710.
- Kosberg, J. I., & Mangum, W. P. (2002). The invisibility of older men in gerontology. *Gerontology & Geriatrics Education*, 22(4), 27–42.
- Kristeva, J. (1982). *Powers of horror: An essay on abjection* (L. S. Roudiez (Ed.)). Columbia University Press.  
<http://users.clas.ufl.edu/burt/touchyfeelingsmaliciousobjects/Kristevapowersofhorrorabjection.pdf>
- Laberge, S. (2016). Toward an integration of gender into Bourdieu's concept of cultural capital. *Sociology of Sport Journal*, 12(2), 132–146. <https://doi.org/10.1123/ssj.12.2.132>
- Laing, T. (2017). Black masculinities expressed through, and constrained by, brotherhood. *Journal of Men's Studies*, 25(2), 168–197. <https://doi.org/10.1177/1060826516661186>
- Laslett, P. (1987). The emergence of the third age. *Ageing and Society*, 7(2), 133–160.  
<https://doi.org/10.1017/S0144686X00012538>
- Laslett, P. (1991). *A fresh map of life: The emergence of the third age*. Harvard University Press.
- Lassen, A. J., & Moreira, T. (2014). Unmaking old age: Political and cognitive formats of active ageing. *Journal of Aging Studies*, 30, 33–46.
- Law, R. (1997). Masculinity, place, and beer advertising in New Zealand: The Southern Man campaign. *New Zealand Geographer*, 53(2), 22–28.
- Lawton, M. P., & Nahemow, L. (1973). Ecology and the aging process. In C. Eisdorfer & M. P. Lawton (Eds.), *The psychology of adult development and aging*. (pp. 619–674). American Psychological Association. <https://doi.org/10.1037/10044-020>
- Lawton, M. P. (1985). The elderly in context: Perspectives from environmental psychology and gerontology. *Environment and Behavior*, 17(4), 501–519.  
<https://doi.org/10.1177/0013916585174005>
- Lawton, M.P. (1989). Behaviour-relevant ecological factors. In K. W. Schaie & C. Schooler (Eds.), *Social structure and aging : Psychological processes*. (pp. 57–78). Lawrence Erlbaum Associates.

- Lemon, B. W., Bengtson, V. L., & Peterson, J. A. (1972). An exploration of the activity theory of aging: Activity types and life satisfaction among in-movers to a retirement community. *Journal of Gerontology*, 27(4), 511–523.
- Lennartsson, C., & Silverstein, M. (2001). Does engagement with life enhance survival of elderly people in Sweden? The role of social and leisure activities. *Journals of Gerontology - Series B Psychological Sciences and Social Sciences*, 56(6), 335–342. <https://doi.org/10.1093/geronb/56.6.S335>
- Levant, R. F. (2011). Research in the psychology of men and masculinity using the gender role strain paradigm as a framework. *American Psychologist*, 66(8), 765.
- Levant, R. F., Hall, R. J., & Rankin, T. J. (2013). Male Role Norms Inventory–Short Form (MRNI-SF): Development, confirmatory factor analytic investigation of structure, and measurement invariance across gender. *Journal of Counseling Psychology*, 60(2), 228–238.
- Levant, R. F., Wimer, D. J., & Williams, C. M. (2011). An evaluation of the Health Behavior Inventory-20 (HBI-20) and its relationships to masculinity and attitudes towards seeking psychological help among college men. *Psychology of Men & Masculinity*, 12(1), 26–41.
- Lezotte, C. (2015). Out on the highway: Cars, community, and the gay driver. *Culture, Society, and Masculinities*, 7(2), 121. <http://search.proquest.com.ezproxy.massey.ac.nz/openview/35ad7a85e3ffe115219d6b6eb95501b7/1?pq-origsite=gscholar&cbl=53089>
- Liepins, R. (2000). Making men: The construction and representation of agriculture-based masculinities in Australia and New Zealand. *Rural Sociology*, 65(4), 605–620.
- Limmer, M. (2014). The pressure to perform: Understanding the Impact of masculinities and social exclusion on young men's sexual risk taking. *International Journal of Men's Health*, 13(3), 184–202. <https://doi.org/10.3149/jmh.1303.184>
- Lindemann, K., & Cherney, J. L. (2008). Communicating in and through “Murderball”: Masculinity and disability in wheelchair rugby. *Western Journal of Communication*, 72(2), 107–125. <https://doi.org/10.1080/10570310802038382>
- Litwin, H., & Shiovitz-Ezra, S. (2006). The association between activity and wellbeing in later life: What really matters? *Ageing and Society*, 26(02), 225–242.
- Lloyd, L., Calnan, M., Cameron, A., Seymour, J., & Smith, R. (2014). Identity in the fourth age: Perseverance, adaptation and maintaining dignity. *Ageing and Society*, 34(01), 1–19.

- Longino, C. F., & Kart, C. S. (1982). Explicating activity theory: A formal replication. *Journal of Gerontology*, 37(6), 713–722.
- Lorber, J. (1996). Beyond the binaries: Depolarizing the categories of sex, sexuality, and gender. *Sociological Inquiry*, 66(2), 143–160. <https://doi.org/10.1111/j.1475-682x.1996.tb00214.x>
- Lowry, L. (1979). *Social work with the aging: the challenge and promise of later years*. Harper & Row.
- Lumsden, K. (2010). Gendered performances in a male-dominated subculture: “Girl Racers”, car modification and the quest for masculinity. *Sociological Research Online*, 15(3), 1–11. <https://doi.org/10.5153/sro.2123>
- Lynott, R. J., & Lynott, P. P. (1996). Tracing the course of theoretical development in the sociology of aging. *The Gerontologist*, 36(6), 749–760.
- Lyons, A.C., & Gough, B. (2017). Masculinities, alcohol consumption and social networking. In A. C Lyons, T. McCreanor, I. Goodwin, & H. Moewaka Barnes (Eds.), *Youth drinking cultures in a digital world: Alcohol, social media and cultures of intoxication*. Routledge.
- Lyons, A. C. (2000). Examining media representations: Benefits for health psychology. *Journal of Health Psychology*, 5(3), 349–358. <https://doi.org/10.1177/135910530000500307>
- Maddox, G. L. (1987). Aging differently. *Gerontologist*, 27(5), 557–564. <https://doi.org/10.1093/geront/27.5.557>
- Mahalik, J. R. (2014). Both/and, not either/or: A call for methodological pluralism in research on masculinity. *Psychology of Men & Masculinity*, 15(4), 365. <https://doi.org/10.1037/a0037308>
- Mahalik, J. R., Levi-Minzi, M., & Walker, G. (2007). Masculinity and health behaviors in Australian men. *Psychology of Men & Masculinity*, 8(4), 240–249. <https://doi.org/10.1037/1524-9220.8.4.240>
- Mansfield, A. K., Addis, M. E., & Mahalik, J. R. (2003). “ Why won’t he go to the doctor?”: The psychology of men’s help seeking. *International Journal of Men’s Health*, 2(2), 93.
- Marchant, T. (2013). Keep going: career perspectives on ageing and masculinity of self-employed tradesmen in Australia. *Construction Management and Economics*, 31(8), 845–860. <https://doi.org/10.1080/01446193.2013.808353>
- Marshall, B. L., & Katz, S. (2002). Forever functional: Sexual fitness and the ageing male body. *Body & Society*, 8(4), 43–70.

- Marshall, V. W. (2005). No exit: A Symbolic Interactionist perspective on aging. *The International Journal of Aging and Human Development*, 9(4), 345–358.  
<https://doi.org/10.2190/dmma-4bkl-9p36-d6bx>
- Marsiglio, W., & Greer, R. A. (1994). A gender analysis of older men's sexuality: social, psychological and biological dimensions. *Older Men's Lives*, 122–140.
- Martino, W., & Pallotta-Chiarolli, M. (2003). *So what's a boy?: Addressing issues of masculinity and schooling*. Open University Press.
- Mays, N. (2013). Reorienting the New Zealand health care system to meet the challenge of long-term conditions in a fiscally constrained environment. *Wellington: New Zealand Treasury*.
- McCall, L. (1992). Does gender fit? Bourdieu, feminism, and conceptions of social order. *Theory and Society*, 21(6), 837–867. <https://doi.org/10.1007/BF00992814>
- McDermott, R. C., Schwartz, J. P., Lindley, L. D., & Proietti, J. S. (2014). Exploring men's homophobia: Associations with religious fundamentalism and gender role conflict domains. *Psychology of Men & Masculinity*, 15(2), 191.
- McGuire, F., & Norman, W. (2005). The role of constraints in successful aging: Inhibiting or enabling? In E. L. Jackson & D. Scott (Eds.), *Constraints to Leisure* (pp. 89–101). Venture Publishing.
- McIntosh, P. (1988). White privilege and male privilege: A personal account of coming to see correspondences through work in women's studies. *Working Paper 189*, 1–25.  
<https://www.collegeart.org/pdf/diversity/white-privilege-and-male-privilege.pdf>
- McLaren, S., Gomez, R., Gill, P., & Chesler, J. (2015). Marital status and suicidal ideation among Australian older adults: The mediating role of sense of belonging. *International Psychogeriatrics*, 27(01), 145–154.
- McMahon, A. (1993). Male readings of feminist theory: The psychologization of sexual politics in the masculinity literature. *Theory and Society*, 22(5), 675–695.  
<https://doi.org/10.1007/BF00993542>
- McNeill, L. S., & Douglas, K. (2011). Retailing masculinity: Gender expectations and social image of male grooming products in New Zealand. *Journal of Retailing and Consumer Services*, 18(5), 448–454.
- McRobbie, A. (2004). Post-feminism and popular culture. *Feminist Media Studies*, 4(3), 255–264. <https://doi.org/10.1080/1468077042000309937>
- McRobbie, A. (2009). *The aftermath of feminism: Gender, culture and social change*. Sage.
- McRobbie, A. (2011). Beyond post-feminism. *Public Policy Research*, 18(3), 179–184.

- <https://doi.org/10.1111/j.1744-540X.2011.00661.x>
- McVittie, C., & Willock, J. (2006). “You can’t fight windmills”: How older men do health, ill health, and masculinities. *Qualitative Health Research*, 16(6), 788–801.
- Meadows, R., & Davidson, K. (2006). Maintaining manliness in later life: Hegemonic masculinities and emphasized femininities. In T. & S. Calasanti K. (Ed.), *Age matters: Realigning feminist thinking* (pp. 295–312). Taylor & Francis Group.
- Meier-Pesti, K., & Penz, E. (2008). Sex or gender? Expanding the sex-based view by introducing masculinity and femininity as predictors of financial risk taking. *Journal of Economic Psychology*, 29(2), 180–196.
- Mellso, G., & Smith, B. (2007). Reflections on masculinity, culture and the diagnosis of depression. *Australian and New Zealand Journal of Psychiatry*, 41(10), 850–853.  
<https://doi.org/10.1080/00048670701579082>
- Menec, V. H. (2003). The relation between everyday activities and successful aging: A 6-year longitudinal study. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 58(2), 74–82.
- Messerschmidt, J. W. (2008). *And Now, the Rest of the A Commentary on Christine Beasley’s “Rethinking Hegemonic Masculinity in a Globalizing World.”* 11, 104–108.  
<https://doi.org/10.1177/1097184X08315103>
- Messner, M. A. (1998). The limits of “the male sex role.” *Gender & Society*, 12(3), 255–276.  
<https://doi.org/10.1177/0891243298012003002>
- Michniewicz, K. S., Bosson, J. K., Lenes, J. G., & Chen, J. I. (2016). Gender-atypical mental illness as male gender threat. *American Journal of Men’s Health*, 10(4), 306–317.
- Miller, E., Buys, L., & Roberto, K. (2006). Feeling blue? The importance of a confidant for the well-being of older rural married Australian and American men. *Ageing International*, 31(4), 283–295.
- Miller, K. E. (2008). Wired: Energy drinks, jock identity, masculine norms, and risk taking. *Journal of American College Health*, 56(5), 481–489.  
<https://doi.org/10.3200/JACH.56.5.481-490>
- Miner, M. M., & Perelman, M. A. (2013). A psychological perspective on male rejuvenation. *Fertility and Sterility*, 99(7), 1803–1806.
- Minichiello, V., Browne, J., & Kendig, H. (2000). Perceptions and consequences of ageism: views of older people. *Ageing and Society*, 20(03), 253–278.
- Möller-Leimkühler, A. M., Bottlender, R., Strauß, A., & Rutz, W. (2004). Is there evidence for a male depressive syndrome in inpatients with major depression? *Journal of*

- Affective Disorders*, 80(1), 87–93. [https://doi.org/10.1016/S0165-0327\(03\)00051-X](https://doi.org/10.1016/S0165-0327(03)00051-X)
- Moller, M. (2007). Exploiting patterns: A critique of hegemonic masculinity. *Journal of Gender Studies*, 16(3), 263–276. <https://doi.org/10.1080/09589230701562970>
- Monaghan, L. (2001). Looking good, feeling good: the embodied pleasures of vibrant physicality. *Sociology of Health & Illness*, 23(3), 330–356. <https://doi.org/10.1111/1467-9566.00255>
- Mulley, G. (2007). Myths of ageing. *Clinical Medicine (London, England)*, 7(1), 68–72. <https://doi.org/10.7861/CLINMEDICINE.7-1-68>
- Mulley, G. (2012). A history of geriatrics and gerontology. *European Geriatric Medicine*, 3(4), 225–227.
- Munsch, C. L., & Gruys, K. (2018). What threatens, defines: Tracing the symbolic boundaries of contemporary masculinity. *Sex Roles*, 79(7–8), 375–392. <https://doi.org/10.1007/s11199-017-0878-0>
- Murray, D. A. B. (2003). Who Is Takatāpui? Māori language, sexuality and identity in Aotearoa/New Zealand. *Anthropologica*, 45(2), 233. <https://doi.org/10.2307/25606143>
- Murray, T., & Lewis, V. (2014). Gender-role conflict and men's body satisfaction: The moderating role of age. *Psychology of Men & Masculinity*, 15(1), 40.
- Neugarten, B. L. (1973). Personality change in late life: A developmental perspective. In C. Eisdorfer & M. P. Lawton (Eds.), *The psychology of adult development and aging* (pp. 311–335). American Psychological Association.
- Neugarten, B. L., Havighurst, R. J., & Tobin, S. S. (1996). Personality and patterns of aging. In D. A. Neugarten (Ed.), *The meanings of age: Selected papers of Bernice L. Neugarten* (pp. 264–269). University of Chicago Press.
- Neville, S., Adams, J., Montayre, J., Larmer, P., Garrett, N., Stephens, C., & Alpass, F. (2018). Loneliness in men 60 years and over: The association with purpose in life. *American Journal of Men's Health*, 12(4), 730–739. <https://doi.org/10.1177/1557988318758807>
- Newman, D. M., & O'Brien, J. (2013). *Sociology : exploring the architecture of everyday life* (9th ed.). Sage.
- Nguyen, C. M., Liu, W. M., Hernandez, J. O., & Stinson, R. (2012). Problem-solving appraisal, gender role conflict, help-seeking behavior, and psychological distress among men who are homeless. *Psychology of Men & Masculinity*, 13(3), 270–282.
- Nicholas, L., & Agius, C. (2017). The persistence of global masculinism: Discourse, gender and neo-colonial re-articulations of violence. In *The Persistence of Global Masculinism:*

- Discourse, Gender and Neo-Colonial Re-Articulations of Violence*. Springer International Publishing. <https://doi.org/10.1007/978-3-319-68360-7>
- Nimrod, G., & Kleiber, D. A. (2007). Reconsidering change and continuity in later life: Toward an innovation theory of successful aging. *The International Journal of Aging and Human Development*, 65(1), 1–22.
- Noone, J. H., & Stephens, C. (2008). Men, masculine identities, and health care utilisation. *Sociology of Health & Illness*, 30(5), 711–725.
- O'Brien, R., Hunt, K., & Hart, G. (2005). 'It's caveman stuff, but that is to a certain extent how guys still operate': Men's accounts of masculinity and help seeking. *Social Science & Medicine*, 61(3), 503–516.
- O'Neil, J. M., Helms, B. J., Gable, R. K., David, L., & Wrightsman, L. S. (1986). Gender-Role Conflict Scale: College men's fear of femininity. *Sex Roles*, 14(5–6), 335–350.
- O'Neill, R. (2014). Whither critical masculinity studies? Notes on inclusive masculinity theory, postfeminism, and sexual politics. *Men and Masculinities*, 18(1), 100–120. <https://doi.org/10.1177/1097184X14553056>
- Ogden-Barnes, S., & Minahan, S. (2006). The Greydollarfella: An endangered species or a market opportunity? *Business Horizons*, 49(4), 287–292.
- Ojala, H., Calasanti, T., King, N., & Pietilä, I. (2016). Natural(ly) men: masculinity and gendered anti-ageing practices in Finland and the USA. *Ageing and Society*, 36(2), 356–375. <https://doi.org/10.1017/S0144686X14001196>
- Okun, M. A., & Stock, W. A. (1987). Correlates and components of subjective well-being among the elderly. *Journal of Applied Gerontology*, 6(1), 95–112.
- Okun, M. A., Stock, W. A., Haring, M. J., & Witter, R. A. (1984). The social activity/subjective well-being relation a quantitative synthesis. *Research on Aging*, 6(1), 45–65.
- Oliffe, J. (2009). *Health Behaviors, Prostate Cancer, and Masculinities: A Life Course Perspective*, 11, 346–366. <https://doi.org/10.1177/1097184X06298777>
- Oliffe, J. L. (2005). Constructions of masculinity following prostatectomy-induced impotence. *Social Science & Medicine*, 60(10), 2249–2259.
- Oliffe, J. L., Rasmussen, B., Bottorff, J. L., Kelly, M. T., Galdas, P. M., Phinney, A., & Ogrodniczuk, J. S. (2013). Masculinities, work, and retirement among older men who experience depression. *Qualitative Health Research*, 23(12), 1626–1637. <https://doi.org/10.1177/1049732313509408>
- Olsen, P., Elliott, J. M., Frampton, C., & Bradley, P. S. (2015). Winning or losing does



- matter: Acute cardiac admissions in New Zealand during Rugby World Cup tournaments. *European Journal of Preventive Cardiology*, 22(10), 1254–1260.
- Osgerby, B. (2003). A pedigree of the consuming male: masculinity, consumption and the American 'leisure class.' *The Sociological Review*, 51(1), 57–85.  
<https://doi.org/10.1111/j.1467-954X.2003.tb03603.x>
- Oxman, T. E., Berkman, L. F., Kasl, S., Freeman, D. H., & Barrett, J. (1992). Social support and depressive symptoms in the elderly. *American Journal of Epidemiology*, 135(4), 356–368. <https://doi.org/10.1093/oxfordjournals.aje.a116297>
- Paechter, C. (2003). Masculinities and femininities as communities of practice. *Women's Studies International Forum*, 26(1), 69–77. [https://doi.org/10.1016/S0277-5395\(02\)00356-4](https://doi.org/10.1016/S0277-5395(02)00356-4)
- Parker, M. B., & Curtner-Smith, M. D. (2012). Sport education: A panacea for hegemonic masculinity in physical education or more of the same? *Sport, Education and Society*, 17(4), 479–496. <https://doi.org/10.1080/13573322.2011.608945>
- Patterson, M., & Elliott, R. (2002). Negotiating masculinities: Advertising and the inversion of the male gaze. *Consumption, Markets and Culture*, 5(3), 231–249.  
<https://doi.org/10.1080/10253860290031631>
- Pearson, S. (2014). Televisual transgender: Hybridizing the mainstream in Pasifika New Zealand. In N. Besnier & K. Alexeyeff (Eds.), *Gender on the edge: Transgender, gay, and other Pacific Islanders* (pp. 241–265). University of Hawaii Press.  
<https://doi.org/10.5860/choice.51-7046>
- Pederson, E. L., & Vogel, D. L. (2007). Male gender role conflict and willingness to seek counseling: Testing a mediation model on college-aged men. *Journal of Counseling Psychology*, 54(4), 373–384. <https://doi.org/10.1037/0022-0167.54.4.373>
- Pedhazur, E. J., & Tetenbaum, T. J. (1979). Bem Sex Role Inventory: A theoretical and methodological critique. *Journal of Personality and Social Psychology*, 37(6), 996–1016. <https://doi.org/10.1037/0022-3514.37.6.996>
- Penninx, B. W. J. H., Deeg, D. J. H., van Eijk, J. T. M., Beekman, A. T. F., & Guralnik, J. M. (2000). Changes in depression and physical decline in older adults: A longitudinal perspective. *Journal of Affective Disorders*, 61(1), 1–12.
- Peralta, R. L., Steele, J. L., Nofziger, S., & Rickles, M. (2010). The impact of gender on binge drinking behavior among US college students attending a Midwestern university: An analysis of two gender measures. *Feminist Criminology*, 5(4), 355–379.  
<https://doi.org/10.1177/1557085110386363>

- person, K. G.-T. social construction of the, & 1985, undefined. (1985). Social Constructionist Inquiry: Context and Implications. *Springer*, 3–18.  
[https://doi.org/10.1007/978-1-4612-5076-0\\_1](https://doi.org/10.1007/978-1-4612-5076-0_1)
- Phillips, J. (1987). *A man's country?: The image of the Pakeha male, a history*. Penguin Books.
- Pini, B. (2005). Interviewing men: Gender and the collection and interpretation of qualitative data. *Journal of Sociology*, 41(2), 201–216.
- Pleck, J. (1976). The male sex role: Definitions, problems, and sources of change. *Journal of Social Issues*, 32(3), 155–164. <https://doi.org/10.1111/j.1540-4560.1976.tb02604.x>
- Poggio, B. (2006). Editorial: Outline of a theory of gender practices. In *Gender, Work and Organization* (Vol. 13, Issue 3, pp. 225–233). <https://doi.org/10.1111/j.1468-0432.2006.00305.x>
- Pompper, D. (2010). Masculinities, the metrosexual, and media images: Across dimensions of age and ethnicity. *Sex Roles*, 63(9–10), 682–696. <https://doi.org/10.1007/s11199-010-9870-7>
- Potter, J., & Wetherell, M. (1987). *Discourse and social psychology: Beyond attitudes and behaviour*. Sage.
- Potts, A. (2000). "The essence of the hard on" Hegemonic Masculinity and the cultural construction of erectile dysfunction. *Men and Masculinities*, 3(1), 85–103.
- Potts, A., Grace, V. M., Vares, T., & Gavey, N. (2006). 'Sex for life'? Men's counter-stories on 'erectile dysfunction', male sexuality and ageing. *Sociology of Health & Illness*, 28(3), 306–329.
- Price, D., Bisdee, D., Daly, T., Livsey, L., & Higgs, P. (2014). Financial planning for social care in later life: The 'shadow' of fourth age dependency. *Ageing and Society*, 34(03), 388–410.
- Ranzijn, R. (2010). Active ageing—Another way to oppress marginalized and disadvantaged elders? Aboriginal elders as a case study. *Journal of Health Psychology*, 15(5), 716–723.
- Rapoport, M. J. (2012). Depression following traumatic brain injury: Epidemiology, risk factors and management. *CNS Drugs*, 26(2), 111–121.  
<https://doi.org/10.2165/11599560-000000000-00000>
- Read, C. (1971). Pre-school children's knowledge of English phonology. *Harvard Educational Review*, 41(1), 1–34.  
<https://doi.org/10.17763/haer.41.1.91367v0h80051573>

- Redshaw, S. (2017). *In the company of cars: Driving as a social and cultural practice*. CRC Press.
- Reynolds, G. L., Fisher, D. G., Dyo, M., & Huckabay, L. M. (2016). Using the Bem and Klein grid scores to predict health services usage by men. *Behavioral Medicine*, 42(3), 143–149.
- Ricciardelli, R., Clow, K. A., & White, P. (2010). Investigating hegemonic masculinity: Portrayals of masculinity in men's lifestyle magazines. *Sex Roles*, 63(1–2), 64–78. <https://doi.org/10.1007/s11199-010-9764-8>
- Riley, M. W. (1987). On the significance of age in sociology. *American Sociological Review*, 52(1), 1–14.
- Riley, S. (2001). Maintaining power: Male constructions of “feminists” and “feminist values.” *Feminism and Psychology*, 11(1), 55–78. <https://doi.org/10.1177/0959353501011001004>
- Rinne, T., & Fairweather, J. (2011). Modelling cultural, national and innovation identities in order to understand New Zealand's modest innovation performance. *Sites: A Journal of Social Anthropology and Cultural Studies*, 8(2), 77–105.
- Robertson, S. (2007). *Understanding men and health: Masculinities, identity and well-being*. Open University Press.
- Robertson, Steve. (2006). “I've been like a coiled spring this last week”: Embodied masculinity and health. *Sociology of Health and Illness*, 28(4), 433–456. <https://doi.org/10.1111/j.1467-9566.2006.00500.x>
- Rodriguez, L., George, J. R., & McDonald, B. (2015). Constructing legitimate and illegitimate Pasifika masculinities in the global diaspora. *Culture, Society and Masculinities*, 7(2), 102–120. <https://doi.org/http://dx.doi.org/10.3149/CSM.0702.102>
- Rose, A. M. (1962). The subculture of the aging: A topic for sociological research. *Gerontologist*, 2(3), 123–127. <https://doi.org/10.1093/geront/2.3.123>
- Rose, N. (1999). *Powers of freedom: Reframing political thought*. Cambridge University Press.
- Rose, N. (2009). Power and subjectivity: Critical history and psychology. In *Historical Dimensions of Psychological Discourse* (pp. 103–124). <https://doi.org/10.1017/cbo9780511571329.006>
- Rosenfield, S., & Mouzon, D. (2013). Gender and mental health. In S. Carol, A. A. Bierman, & J. C. Phelan (Eds.), *Handbook of the sociology of mental health* (2nd ed., pp. 277–296). Springer.

- Rosow, I. (1973). The social context of the aging self. *Gerontologist*, 13(1), 82–87.  
<https://doi.org/10.1093/geront/13.1.82>
- Rowe, J. W., & Kahn, R. L. (1987). Human aging: Usual and successful. *Science*, 237(4811), 143–149. <https://doi.org/10.1126/science.3299702>
- Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist*, 37(4), 433–440.
- Roy, M., & Payette, H. (2012). The body image construct among Western seniors: A systematic review of the literature. *Archives of Gerontology and Geriatrics*, 55(3), 505–521.
- Rozanova, J. (2010). Discourse of successful aging in The Globe & Mail: Insights from critical gerontology. *Journal of Aging Studies*, 24(4), 213–222.
- Sánchez, F. J., Westefeld, J. S., Liu, W. M., & Vilain, E. (2010). Masculine gender role conflict and negative feelings about being gay. *Professional Psychology: Research and Practice*, 41(2), 104–111.  
<https://doi.org/http://dx.doi.org.ezproxy.massey.ac.nz/10.1037/a0015805>
- Sandberg, L. (2011). *Getting intimate: A feminist analysis of old age, masculinity and sexuality* (1:1). Linköping University.
- Scherer, J., & Jackson, S. J. (2007). Sports advertising, cultural production and corporate nationalism at the global-local nexus: Branding the New Zealand All Blacks. *Sport in Society*, 10(2), 268–284. <https://doi.org/10.1080/17430430601147112>
- Schippers, M. (2007). Recovering the feminine other: Masculinity, femininity, and gender hegemony. *Theory and Society*, 36(1), 85–102. <https://doi.org/10.1007/s11186-007-9022-4>
- Schrock, D., & Schwalbe, M. (2009). Men, masculinity, and manhood acts. *Annual Review of Sociology*, 35, 277–295. <https://doi.org/10.1146/annurev-soc-070308-115933>
- Seeman, T. E., Berkman, L. F., Blazer, D., & Rowe, J. W. (1994). Social ties and support and neuroendocrine function: The MacArthur studies of successful aging. *Annals of Behavioral Medicine*, 16(2), 95–106. <https://doi.org/10.1093/abm/16.2.95>
- Segre, S. (2016). Social constructionism as a sociological approach. *Human Studies*, 39(1), 93–99. <https://doi.org/10.1007/s10746-016-9393-5>
- Seidler, Victor. (1989). *Rediscovering masculinity. Reason, language and sexuality*. Routledge.
- Seidler, VJ. (1994). *Recovering the self: Morality and social theory*. Routledge.
- Seidler, Z. E., Dawes, A. J., Rice, S. M., Oliffe, J. L., & Dhillon, H. M. (2016). The role of masculinity in men's help-seeking for depression: A systematic review. *Clinical*

- Psychology Review*, 49, 106–118. <https://doi.org/10.1016/j.cpr.2016.09.002>
- Sen, A. (1992). *Inequality reexamined*. Oxford University Press.
- Sen, A. (1993). Capability and well-being. In N. Martha & A. Sen (Eds.), *The quality of life*. Oxford Scholarship Online. <https://doi.org/10.1093/0198287976.001.0001>
- Sender, K. (2006). Queens for a day: Queer eye for the straight guy and the neoliberal project. *Critical Studies in Media Communication*, 23(2), 131–151. <https://doi.org/10.1080/07393180600714505>
- Shakespeare, T. (1999). The sexual politics of disabled masculinity. In *Sexuality and Disability* (Vol. 17, Issue 1, pp. 53–64). <https://doi.org/10.1023/A:1021403829826>
- Shepherd, C. B., & Rickard, K. M. (2012). Drive for muscularity and help-seeking: The mediational role of gender role conflict, self-stigma, and attitudes. *Psychology of Men & Masculinity*, 13(4), 379–392.
- Shildrick, M. (1997). *Leaky bodies and boundaries: Feminism, postmodernism and (bio)ethics*. Routledge.
- Shirani, F. (2013). The spectre of the wheezy dad: Masculinity, fatherhood and ageing. *Sociology*, 47(6), 1104–1119.
- Silver, C. B. (2003). Gendered identities in old age: Toward (de) gendering? *Journal of Aging Studies*, 17(4), 379–397.
- Silverman, D. (2001). *Interpreting qualitative data: Methods for analysing talk, text and interaction*. Sage.
- Sinnott, J. D. (1984). Older men, older women: Are their perceived sex roles similar? *Sex Roles*, 10(11–12), 847–856.
- Sixsmith, J., & Boneham, M. (2002). Older men's participation in community life: notions of social capital, health and empowerment. *Ageing International*, 28(4), 372–388.
- Smith, J. A., Braunack-Mayer, A., & Wittert, G. (2006). What do we know about men's help-seeking and health service use? *Medical Journal of Australia*, 184(2), 81–83.
- Smith, J. A., Braunack-Mayer, A., Wittert, G., & Warin, M. (2007). "I've been independent for so damn long!": Independence, masculinity and aging in a help seeking context. *Journal of Aging Studies*, 21(4), 325–335.
- Sontag, S. (2018). The double standard of aging. In M. Pearsall (Ed.), *The other within us: Feminist explorations of women and aging* (pp. 19–24). Routledge. <https://doi.org/10.4324/9780429496059>
- Spector-Mersel, G. (2006). Never-aging stories: Western hegemonic masculinity scripts. *Journal of Gender Studies*, 15(1), 67–82.

- Springer, K. W., & Mouzon, D. M. (2011). “Macho Men” and preventive health care: Implications for older men in different social classes. *Journal of Health and Social Behavior*, 52(2), 212–227.
- Stathi, A., & Simey, P. (2007). Quality of life in the fourth age: Exercise experiences of nursing home residents. *Journal of Aging and Physical Activity*, 15(3), 272–286.
- Statistics NZ. (2012). *Population Mythbusters- The life expectancy for males is 6 years less than for females*.  
[http://www.stats.govt.nz/browse\\_for\\_stats/population/mythbusters/males-life-expectancy-lower.aspx](http://www.stats.govt.nz/browse_for_stats/population/mythbusters/males-life-expectancy-lower.aspx)
- Statistics NZ. (2013). *2013 Census QuickStats about people aged 65 and over*.  
<http://www.stats.govt.nz/Census/2013-census/profile-and-summary-reports/quickstats-65-plus/population-overview.aspx>
- Statistics NZ. (2014). *National Population Projections: 2014(base)–2068*.  
[http://www.stats.govt.nz/browse\\_for\\_stats/population/estimates\\_and\\_projections/NationalPopulationProjections\\_HOTP2014.aspx](http://www.stats.govt.nz/browse_for_stats/population/estimates_and_projections/NationalPopulationProjections_HOTP2014.aspx)
- Statistics NZ. (2015). *2013 Census QuickStats about people aged 65 and over*.  
<http://www.stats.govt.nz>.
- Stephens, C. (2017). From success to capability for healthy ageing: Shifting the lens to include all older people. In *Critical Public Health* (Vol. 27, Issue 4, pp. 490–498).  
<https://doi.org/10.1080/09581596.2016.1192583>
- Stephens, C., Alpass, F., Towers, A., & Stevenson, B. (2011). The effects of types of social networks, perceived social support, and loneliness on the health of older people: Accounting for the social context. *Journal of Aging and Health*, 23(6), 887–911.  
<https://doi.org/10.1177/0898264311400189>
- Stephens, C., Breheny, M., & Mansvelt, J. (2015). Healthy ageing from the perspective of older people: A capability approach to resilience. *Psychology and Health*, 30(6), 715–731. <https://doi.org/10.1080/08870446.2014.904862>
- Stephoe, A., Shankar, A., Demakakos, P., & Wardle, J. (2013). Social isolation, loneliness, and all-cause mortality in older men and women. *Proceedings of the National Academy of Sciences*, 110(15), 5797–5801. <https://doi.org/10.1073/pnas.1219686110>
- Strough, J., Leszczynski, J. P., Neely, T. L., Flinn, J. A., & Margrett, J. (2007). From adolescence to later adulthood: Femininity, masculinity, and androgyny in six age groups. *Sex Roles*, 57(5–6), 385–396.
- Szymanski, D. M., Moffitt, L. B., & Carr, E. R. (2011). Sexual objectification of women:

- Advances to theory and research 17. *The Counseling Psychologist*, 39(1), 6–38.  
<https://doi.org/10.1177/0011000010378402>
- Tagg, B. (2008). “Imagine, a man playing netball!” Masculinities and sport in New Zealand. *International Review for the Sociology of Sport*, 43(4), 409–430.
- Tannenbaum, C., & Frank, B. (2011). Masculinity and health in late life men. *American Journal of Men’s Health*, 5(3), 243–254.
- Tarrant, A. (2010). ‘Maturing’ a sub-discipline: The intersectional geographies of masculinities and old age. *Geography Compass*, 4(10), 1580–1591.
- Taylor, G. W., & Ussher, J. M. (2001). Making Sense of S&M: A Discourse Analytic Account. *Sexualities*, 4(3), 293–314. <https://doi.org/10.1177/136346001004003002>
- Terry, G., Hayfield, N., Clarke, V., & Braun, V. (2017). Thematic analysis. In C. Willig & W. S. Rogers (Eds.), *The Sage handbook of qualitative research in psychology*. (pp. 17–37). Sage.
- Thompson, E. H. (1994). Older men as invisible in contemporary society. In E. H. Thompson (Ed.), *Older men’s lives*. Sage.  
<https://doi.org/http://dx.doi.org/10.4135/9781452243474.n1>
- Thompson Jr, E. H. (2006). Images of old men’s masculinity: Still a man? *Sex Roles*, 55(9–10), 633–648. <https://doi.org/10.1007/s11199-006-9119-7>
- Thompson Jr, E. H. (2019). *Men, masculinities, and aging : the gendered lives of older men*. Rowman and Littlefield.
- Thompson Jr, E. H., & Langendoerfer, K. B. (2016). Older men’s blueprint for “being a man.” *Men and Masculinities*, 19(2), 119–147.
- Thurnell-Read, T. (2011a). “Here comes the drunken cavalry”: Managing and negotiating the Britishness of all-male stag tours in Eastern Europe. In Catherine McGlynn & Andrew Mycock (Eds.), *Britishness, identity and citizenship : the view from abroad. British Identities since 1707 (No.2)* (Vol. 2, pp. 215–232). Peter Lang.
- Thurnell-Read, T. (2011b). Off the Leash and Out of Control: Masculinities and Embodiment in Eastern European Stag Tourism. *Sociology*, 45(6), 977–991.  
<https://doi.org/10.1177/0038038511416149>
- Tissue, T. L. (1968). A Guttman scale of disengagement potential. *Journal of Gerontology*, 23(4), 513–516.
- Tobin, S. S. (1999). *Preservation of the self in the oldest years: With implications for practice*. Springer.
- Tornstam, L. (1997). Gerotranscendence: The contemplative dimension of aging. *Journal of*

- Aging Studies*, 11(2), 143–154.
- Twigg, J. (2004). The body, gender, and age: Feminist insights in social gerontology. *Journal of Aging Studies*, 18(1), 59–73.
- Utz, R. L., Carr, D., Nesse, R., & Wortman, C. B. (2002). The effect of widowhood on older adults' social participation: An evaluation of activity, disengagement, and continuity theories. *The Gerontologist*, 42(4), 522–533.
- Uy, P. J., Massoth, N. A., & Gottdiener, W. H. (2014). Rethinking male drinking: Traditional masculine ideologies, gender-role conflict, and drinking motives. *Psychology of Men & Masculinity*, 15(2), 121.
- Van den Hoonaard, D. K. (2007). Aging and masculinity: A topic whose time has come. *Journal of Aging Studies*, 21(4), 277–280.
- van Dyk, S. (2016). The othering of old age: Insights from postcolonial studies. *Journal of Aging Studies*, 39, 109–120.
- Vandello, J. A., & Bosson, J. K. (2013). Hard won and easily lost: A review and synthesis of theory and research on precarious manhood. *Psychology of Men & Masculinity*, 14(2), 101–113. <https://doi.org/10.1037/a0029826>
- Vandello, J. A., Bosson, J. K., Cohen, D., Burnaford, R. M., & Weaver, J. R. (2008). Precarious manhood. *Journal of Personality and Social Psychology*, 95(6), 1325–1339.
- Varley, A., & Blasco, M. (2000). Exiled to the home: Masculinity and ageing in urban Mexico. *The European Journal of Development Research*, 12(2), 115–138.
- Venn, S., & Arber, S. (2011). Day-time sleep and active ageing in later life. *Ageing and Society*, 31(02), 197–216.
- Venuto, D. (2018). *Watch: Speight's "Southern Man" returns with a modern twist in new ad campaign - NZ Herald*. NZ Herald. [https://www.nzherald.co.nz/business/news/article.cfm?c\\_id=3&objectid=12040791](https://www.nzherald.co.nz/business/news/article.cfm?c_id=3&objectid=12040791)
- Verbrugge, L. M. (1985). Gender and health: an update on hypotheses and evidence. *Journal of Health and Social Behavior*, 26(3), 156–182.
- Vighi, F., & Feldner, H. (2007). *Žižek: Beyond Foucault*. Palgrave Macmillan.
- Virtanen, M., Ervasti, J., Mittendorfer-Rutz, E., Lallukka, T., Kjeldgård, L., Friberg, E., Kivimäki, M., Lundström, E., & Alexanderson, K. (2017). Work disability before and after a major cardiovascular event: A ten-year study using nationwide medical and insurance registers. *Scientific Reports*, 7(1), 1–8. <https://doi.org/10.1038/s41598-017-01216-2>
- Vogel, D. L., Wester, S. R., Hammer, J. H., & Downing-Matibag, T. M. (2014). Referring



- men to seek help: The influence of gender role conflict and stigma. *Psychology of Men & Masculinity*, 15(1), 60–67.
- Walker, A. (2002). A strategy for active ageing. *International Social Security Review*, 55(1), 121–139. <https://doi.org/10.1111/1468-246X.00118>
- Walker, A. (2008). Commentary: The emergence and application of active aging in Europe. *Journal of Aging & Social Policy*, 21(1), 75–93.
- Walker, A. (2009). Commentary: The emergence and application of active aging in Europe. *Journal of Aging and Social Policy*, 21(1), 75–93. <https://doi.org/10.1080/08959420802529986>
- Walkerdine, V., & Blackman, L. (2008). Psychology and cultural analysis. In T. Bennett & J. Frow (Eds.), *The SAGE Handbook of Cultural Analysis* (pp. 66–85). Sage. <https://doi.org/10.4135/9781848608443.n3>
- Watkins, E. S. (2012). *Testosterone and the pharmaceuticalization of male aging*. Routledge.
- Watson, J. (2000). *Male bodies : health, culture, and identity*. Open University Press.
- Weaver, J. R., Vandello, J. A., & Bosson, J. K. (2013). Intrepid, imprudent, or impetuous? The effects of gender threats on men's financial decisions. *Psychology of Men & Masculinity*, 14(2), 184–191.
- Weedon, C. (1987). *Feminist Practice and Poststructuralist Theory*. Blackwell.
- Weisz, J. R., Rothbaum, F. M., & Blackburn, T. C. (1984). Standing out and standing in: The psychology of control in America and Japan. *American Psychologist*, 39(9), 955–969. <https://doi.org/10.1037/0003-066X.39.9.955>
- Wenger, G. C., & Jerrome, D. (1999). Change and stability in confidant relationships: Findings from the Bangor Longitudinal Study of Ageing. *Journal of Aging Studies*, 13(3), 269–294.
- West, C., & Zimmerman, D. H. (1987). Doing gender. *Gender & Society*, 1(2), 125–151.
- Wetherell, J. L., Petkus, A. J., McChesney, K., Stein, M. B., Judd, P. H., Rockwell, E., Sewell, D. D., & Patterson, T. L. (2009). Older adults are less accurate than younger adults at identifying symptoms of anxiety and depression. *The Journal of Nervous and Mental Disease*, 197(8), 623–626. <https://doi.org/10.1097/NMD.0b013e3181b0c081>
- Wetherell, M., & Edley, N. (1999). Negotiating hegemonic masculinity: Imaginary positions and psycho-discursive practices. *Feminism & Psychology*, 9(3), 335–356. <https://doi.org/10.1177/0959353599009003012>
- Wetherell, M., & Edley, N. (2014). A discursive psychological framework for analyzing men and masculinities. *Psychology of Men & Masculinity*, 15(4), 355–364.

- Whitehead, S. M. (2002). *Men and masculinities: Key themes and new directions*. Polity.
- Whitley Jr, B. E. (1985). Sex-role orientation and psychological well-being: Two meta-analyses. *Sex Roles*, 12(1–2), 207–225.
- Wiles, J. L., Allen, R. E. S., Palmer, A. J., Hayman, K. J., Keeling, S., & Kerse, N. (2009). Older people and their social spaces: A study of well-being and attachment to place in Aotearoa New Zealand. *Social Science & Medicine*, 68(4), 664–671.  
<https://doi.org/10.1016/j.socscimed.2008.11.030>
- Willer, R., Rogalin, C. L., Conlon, B., & Wojnowicz, M. T. (2013). Overdoing gender: A test of the masculine overcompensation thesis. *American Journal of Sociology*, 118(4), 980–1022.
- Williams, D. R. (2008). The Health of Men: Structured Inequalities and Opportunities. *American Journal of Public Health*, 98(Supplement\_1), S150–S157.  
[https://doi.org/10.2105/ajph.98.supplement\\_1.s150](https://doi.org/10.2105/ajph.98.supplement_1.s150)
- Williams, M. J., Paluck, E. L., & Spencer-Rodgers, J. (2010). The masculinity of money: Automatic stereotypes predict gender differences in estimated salaries. *Psychology of Women Quarterly*, 34(1), 7–20. <https://doi.org/10.1111/j.1471-6402.2009.01537.x>
- Willott, S., & Lyons, A. C. (2012). Consuming male identities: Masculinities, gender relations and alcohol consumption in Aotearoa New Zealand. *Journal of Community & Applied Social Psychology*, 22(4), 330–345. <https://doi.org/10.1002/casp.1115>
- Winston, N. A., & Barnes, J. (2007). Anticipation of retirement among baby boomers. *Journal of Women & Aging*, 19(3–4), 137–159.
- Woodhams, J. M. (2015). *A Critical Realist Study of Political Identity in Aotearoa New Zealand: Materiality, Discourse and Context* [Victoria University of Wellington].  
<http://researcharchive.vuw.ac.nz/handle/10063/4769>
- Wrenn, M. V., & Waller, W. (2017). Care and the neoliberal individual. *Journal of Economic Issues*, 51(2), 495–502. <https://doi.org/10.1080/00213624.2017.1321438>
- Wrosch, C., Heckhausen, J., & Lachman, M. E. (2000). Primary and secondary control strategies for managing health and financial stress across adulthood. *Psychology and Aging*, 15(3), 387–399. <https://doi.org/10.1037/0882-7974.15.3.387>
- Ziegler, F., & Schwanen, T. (2011). “I like to go out to be energised by different people”: An exploratory analysis of mobility and wellbeing in later life. *Ageing and Society*, 31(5), 758–781. <https://doi.org/10.1017/S0144686X10000498>

## **Appendices**

### **Appendix A: Participant information and consent form**

#### **Participant information sheet**

*A qualitative study exploring how older A/NZ men think about masculinity (Working title)*

#### **An Invitation**

My name is Sam Lindsay. I am a doctoral psychology student at Massey University in Wellington. I am inviting men over the age of 65, who are living independently, to participate in research exploring the opportunities, demands, and challenges of growing older as a man within New Zealand.

#### **What is the purpose of this research?**

I seek to learn from independent men over 65, in their own words, about their experiences, both good and bad, during this life stage. The focus of this research has arisen through recognition that much previous research within A/NZ and overseas has often failed to take the experiences of older men into account. However, as you will probably be aware, the proportion of those over 65 in A/NZ is rapidly increasing, adding to the importance of this type of research. The study will be assessed as a doctoral dissertation and may lead to peer-reviewed journal articles.

#### **If you would like to participate, how do you volunteer?**

You can volunteer by emailing Sam Lindsay at [samuel.lindsay@gmail.com](mailto:samuel.lindsay@gmail.com). Following this, Sam will be in touch to arrange an interview and answer any other questions you may have.

#### **If you participate, what will you need to do?**

Participation would include between one and two hours of your time. I can come to your house, or we can arrange a place to meet that suits you better. The research would involve an interview with myself (Sam) where we discuss a range of aspects of manhood including work and money, marriage and relationships, physical challenges, and general thoughts and feelings associated with growing older. I will have a range of questions to loosely guide the discussion, but the discussion will not be rigidly structured. You will need to be prepared to discuss aspects of your life with me, but if you do not want to answer any questions or if there are certain issues you would prefer not to discuss, you are under no obligation whatsoever.

The interviews will be recorded using an audio recorder; you will need to agree to this before we begin.

#### **If you participate, what are the benefits?**

It is hoped that benefit will come from the experience of self-reflecting upon particular aspects of your life. This can be an illuminating and rewarding process for many people. In addition to helping me with my research, you will receive a small token of gratification.

#### **If you participate, what are the risks of being involved?**

There is a small risk that discussing aspects of your life may bring up unpleasant thoughts or feelings. However, this is a small risk. As has been mentioned, you are not required to share any information you are not prepared to share. Additionally, all identifying information will be changed or omitted to eliminate the risk of anyone being able to identify you. Your real name will not be used, and other information such as your current place of residence will be excluded. Other specific details such as any other names (place of work, spouse etc.) will be altered.

### **If you participate, what are your rights?**

You have the right to refuse to answer any question. You have the right to privacy and confidentiality, and to be treated with respect and dignity by the researcher. If at any stage leading up to, or during the interview you change your mind about participating, you have the right to refuse to participate any further. You also have the right to review and edit the transcript of our conversation.

### **If you participate, how will your data be managed and stored?**

The audio recordings will be transcribed. The transcriptions will not have your real names on them. The transcript will be returned to you for checking. If you are happy with the transcript, it will be saved as a password protected document and stored on a password-protected computer. After 6 years these will be destroyed. Upon transcribing our conversation, I will delete the audio recordings

### **Who else is involved in this research?**

My primary supervisor is Associate Professor Keith Tuffin of Massey University, Wellington. My secondary supervisors are Prof. Antonia Lyons, and Dr. Simon Bennett, both of whom are staff of the Massey University Wellington campus. They have extensive collective experience as researchers into a range of social psychology areas. They will be privy to the data and will advise me on aspects of the project.

### **Who should you contact about further information about the research?**

The best person to contact is Sam, at [REDACTED] or by ph. [REDACTED].

Alternatively, Ass. Prof. Keith Tuffin can answer some of your questions. You can contact Mr Tuffin by email: [K.Tuffin@massey.ac.A/NZ](mailto:K.Tuffin@massey.ac.A/NZ), or by phone: (04) 801 5799 ext. 63605.

This project has been evaluated by peer review and judged to be low risk. Consequently it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research. If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Dr Brian Finch, Director (Research Ethics), email [humanethics@massey.ac.A/NZ](mailto:humanethics@massey.ac.A/NZ). "

## Participant Consent Form

*A qualitative study exploring how older A/NZ men think about masculinity (working title)*

I have read the Information Sheet and have had the details of the study explained to me.

My questions have been answered to my satisfaction, and I understand that I may ask further questions at any time.

I agree/do not agree to the interview being sound recorded.

I wish/do not wish to have my recordings returned to me.

I agree/do not agree for the researcher to use the original transcripts for data analysis if I fail to respond with the amendments after 21 days.

I agree to participate in this study under the conditions set out in the Information Sheet

Signature \_\_\_\_\_ Date \_\_\_\_\_

Full name printed \_\_\_\_\_

This project has been evaluated by peer review and judged to be low risk. Consequently it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named in this document are responsible for the ethical conduct of this research. If you have any concerns about the conduct of this research that you want to raise with someone other than the researcher(s), please contact Dr Brian Finch, Director (Research Ethics), email [humanethics@massey.ac.A/NZ](mailto:humanethics@massey.ac.A/NZ). "

## **Appendix B: Interview Questions**

### Interview questions

- Start by telling me a little bit about yourself, your life, work, family etc.
- What does masculinity mean to you? How have your views on this changed over the years?
- In what ways is life different now to other periods in your life?
- Do you feel like life has improved as you've gotten older? Why? Why not?
- What benefits do you see in growing older?
- What are some of the things you worry about?
- What pressures do you feel now, as a man? Are these different from when you were younger?
- Do you feel able to meet these pressures?
- Do you feel pressured to remain young?
- Do you think people in general treat you differently?
- Do you feel valued as an older person?
- Has age at all challenged your ability to function?
- What, if any changes have you noticed as you've grown older?
- What do you think being a man in A/NZ means?
- What differences have you noticed between the pressures exerted on men and women?
- Are you still employed? In what capacity do you work/ have you worked?
- What qualities do you see as important for men to embody?

## Appendix C: Transcription notation

[	C2: quite a [while Mo: [yea	Left brackets indicate the point at which a current speakers talk is overlapped by another's talk
=	W: that I'm aware of = C: = Yes. Would you confirm that?	Equal signs, one at the end of a line and one at the beginning, indicate no gap between the two lines.
(4)	Yes (2) yeah	Numbers in parentheses indicate elapsed time in silence in seconds
_____	What's <u>up</u> ?	Underscoring indicates some form of stress, via pitch and/or amplitude.
WORD	I've got ENOUGH TO WORRY ABOUT	Capitals, except at the beginnings of lines, indicate especially loud sounds relative to the surrounding talk.
{laughter}	{laughter}	Any other significant behaviour – laughter, sighing, intake of breath, etc.
( )	Future risks and ( ) and life ( )	Empty parentheses indicate the transcribers inability to hear what was said.
(word)	Would you see (there) anything positive	Parenthesized words are possible hearings.

(Silverman, 2001)

## **Appendix D: Case study**

### **Case study 6**

**Consideration of the effects of Traumatic Brain Injury on Masculinity in the Case of an Older Male**

**A Case Study Presented in Partial Fulfilment of  
The degree of Doctorate of Clinical Psychology**

**Samuel Lindsay  
2018**

**This case study represents the work of Samuel Lindsay during his internship at Massey  
Psychology Clinic, Wellington in 2018**

**Some information within the case study has been changed to protect the anonymity of the  
client.**

**Candidate: Samuel Lindsay.....Date:.....**

**Supervisor: Melissa DeWolffe.....Date:.....**



## **Abstract**

This case study explores the impact of a traumatic brain injury (TBI) on the functioning of an older New Zealand male. Specifically, the impact of the TBI is related to the loss of traditional, or hegemonic markers of masculinity, such as sexual performance, physical activity, employment and career. It also considers wealth as a way of renegotiating masculinity in older age and mitigating the effects of TBI. In keeping with theories of intersectionality in masculinity research, the decline of physical and cognitive functioning is explored in relation to dominant frameworks for understanding aging, such as successful or active aging, and the concepts of the third and fourth ages.

## **Introduction**

With the rest of the Western world, New Zealand (A/NZ) is experiencing an increase in the ratio of older people (> 65) in the general population. These changes underscore an urgent need to consider the individual subjective experiences of older people (Jackson, 2016) in order to best cater for their psychological needs. This case study explores the ways in which masculinity interacts with age for older men, particularly when setbacks occur. It takes a social-constructionist approach to thinking about the impact of traumatic brain injury and begins by considering wider societal discourses that influence the ways in which masculinity and age are constructed.

Gender is an essential consideration for social psychological research but has been, until recently, relatively neglected in academic and lay thinking about older people (Arber et al., 2003; Higgs & McGowan, 2013); they have been excluded, seen as ‘ungendered’ (Emslie et al., 2006) in sexual decline (Gott & Hinchliff, 2003; Potts et al., 2006) or ‘othered’ in various other ways (Fineman, 2014; Twigg, 2004). Although greater attention has turned older men in recent years, research on older people has generally focussed on women (Canham, 2009; J. Evans et al., 2011) or has not fully explored the role of masculinities (Schrock & Schwalbe, 2009). That there are fewer older men who “are erroneously believed to enjoy a better quality of life” (Kosberg & Mangum, 2002, p. 27) may lie behind the relative omission in the literature. Or, as Twigg (2004) has argued, the competitiveness and public invulnerability that are bound to masculinity might stymie investigations of potential “decline and loss” in men of this age (p.62)

Disruptive events in the lives of men such as divorce, death of a spouse or partner, the loss of employment and sickness, necessitate critical evaluation of previously held attitudes towards gender. (Emslie et al., 2004). Some have considered that, in response to cumulative age related stressors, the gender binary is gradually eroded and identities become more androgynous for older men (Hyde & Phillis, 1979; Silver, 2003; Strough et al., 2007). But rather than considering all older men as 'less gendered' it is important to recognise that some older men may themselves consider masculinity and its related qualities as important to self-identity in older age (Canham, 2009). Thus when aspects of masculinity are constructed by men themselves as 'lost' they may experience distress (Bennett, 2007; Chapple & Ziebland, 2002; Evans et al., 2011).

It is also worth noting that men are less generally diagnosed with 'internalising' disorders such as depression and anxiety (Boyd et al., 2005) – possibly (in part) because of disinclination to report psychological distress. Older rural Australian and American men, for example, were more reluctant to share emotions and this, coupled with social isolation impeded the formation of friendships and contributed to depressive symptoms (Miller, Buys, & Roberto, 2006).

More research is needed to critically consider how masculinity and age intersect (Jackson, 2016; Tarrant, 2010). This case study attempts to aid this endeavour through exploring the potential detrimental effects of loss of physical and cognitive function on an older man; also the role of wealth as a protective factor in mitigating these detrimental effects.

## **Embodiment**

According to some theorists (e.g. Foucault) the body is a site where discourses become manifest, (Dreyfus & Rabinow, 2014). Interconnections between embodiment, discourse, and power are therefore important to consider (Fleming, 1999; Jackson, 2016; Oliffe et al., 2013; Twigg, 2004). Embodiment might refer to the physical prowess that often expresses dominant forms of masculinity; grooming and appearance related concerns; sexual practice, or any other of the myriad ways in which discourses are expressed, felt, or practised by bodies. Although embodiment is crucial to considerations of masculinity, there has been a tendency to view masculinity as relatively disembodied (Holliday & Cairnie, 2007). Differences in the extent to which masculinity is embodied may vary between men of different class status (Connell, 1995; Jackson, 2016). But evidence suggests that masculinity is embodied by all men to some extent and this persists into older age (Ojala et al., 2016).

The extent to which bodily power is impacted is constructed relative to ideal standards promoted by active aging or positive aging discourse. This type of discourse might be seen as part of a public policy effort to mitigate the impacts of the looming ‘grey economy,’ and is facilitated by a neo-liberal emphasis on individual responsibility to manage one’s health and aging (Crawshaw, 2007; Ojala et al., 2016). As Rozanova (2010) argues, active aging discourse serves policy makers by increasing the productivity of older people and reducing dependence on public health care systems. Older men may be conflicted by the pressure to remain fit and attractive to meet these active aging standards but are also expected to physically fail these within a biomedical discourse emphasising the inevitability of decline (Jackson, 2016).

Media promulgate ideal standards, or norms, for older men that are contradictory. (Rozanova, 2010; Thompson Jr, 2006). What have variously been considered as active, successful, or anti-aging discourses have a strong presence within film aimed at the burgeoning older adult audience. On this side of the dichotomy, films attempt to capture the ‘grey dollar’ through a discourse of “renewal and rejuvenation” (Hamad, 2014, p. 81). On the other side, media often present older men - particularly solitary men – unfavourably, as dirty or miserly (Thompson Jr, 2006), and older age is often presented as a time of “decline, decay, death, and loss” (Hamad, 2014, p. 79) by the film industry. This is despite increases in the standard of living, cosmetic surgery, and various other consumer health-care practices which have served to stave off the degeneration once associated with growing old and extend life expectancies (Higgs, 2010; Silver, 2003).

The opposing discourses (decline vs active, healthy aging) operate ‘hand-in-hand’ to market products and services to the lucrative older age market (Ojala et al., 2016). Anti-aging industry advertising ‘pharmaceuticalises’ male aging by manipulating masculine anxieties over decline; it constructs aging as a ‘sickness’ resulting from a loss of testosterone while promising deliverance (Calasanti & King, 2007). Viagra and testosterone replacement supplements promise to restore men to previous levels of sexual potency, power, and various forms of competitive advantage ostensibly enjoyed by younger men (Calasanti & King, 2007; Gross & Blundo, 2005; Marshall & Katz, 2002).

Although activity in older life could be considered important for challenging discourses of inevitable decline and dependency (Walker, 2008) and for providing obvious health benefits (Katz, 2000), active-aging, anti-aging, or successful aging discourses may promote ideals that cannot always be met (Lassen & Moreira, 2014; Ranzijn, 2010; Rozanova, 2010; Venn & Arber, 2011). They have been shown to alienate older people experiencing poverty, or those

who do not fit within the narrow, largely white, middle-class confines of what is deemed ‘successful’ aging (Jackson, 2016; Ranzijn, 2010).

However, emphases on men’s health and vitality within popular media (Crawshaw, 2007) may be offset by constructions of masculinity that inhibit the expression of vulnerability and limit help-seeking behaviours. Courtenay (2000) implicated masculinity in the reluctance for men to seek help because of ‘hegemonic masculinity’ qualities, including “the denial of weakness or vulnerability, emotional and physical control, appearing strong and robust, dismissal of any need for help, a ceaseless interest in sex, the display of aggressive behaviour and physical dominance” (Courtenay, 2000, p. 1389). In addition to a tendency to avoid seeking help for health complaints (Mansfield et al., 2003; O’Brien et al., 2005; Smith et al., 2006) masculinity has been implicated in copious alcohol consumption (Peralta et al., 2010; Thurnell-Read, 2011a); poor diet (Gough, 2007) and risk taking behaviours (Courtenay, 2000; Meier-Pesti & Penz, 2008).

The fact that the life expectancy gap has closed to just 3 years’ difference between men and women in A/NZ (Statistics NZ, 2012) suggests a dissipation of these types of health-related behaviour differences; it also intimates that gender constructions are flexible and open to change. It would seem that men do attend to health behaviours but do so more readily where these health behaviours facilitate the expression of dominant masculinities (Calasanti et al., 2013) or masculine performance (Ojala et al., 2016). Nevertheless, the fact that, of the population over the age of 85, 64.3 percent are women (Statistics NZ, 2015) suggests disparity related to gendered health outcomes.

While the extent to which health averse or risky behaviours persist into older age remains contestable, what is less equivocal is that older men are less likely to seek social support when problems arise (Evans et al., 2011; Meadows & Davidson, 2006; Rosenfield & Mouzon, 2013; Springer & Mouzon, 2011; Tannenbaum & Frank, 2011). This is perhaps understandable, given they are pinioned between contradictory discourses: one values the retention of independence and invulnerability as a sign of his masculinity, the other chastises him for maintaining this independence in not seeking help (Smith et al., 2007).

Noone and Stephens (2008) note that older, rural men, adopted a position as more legitimate users of healthcare than women to negotiate two opposing positions: “the virtuous regular health care user” and “the masculine infrequent user of healthcare services” (p. 711). In contrast, women were constructed by the participants as seeking health care for more trivial reasons – perhaps because healthcare has traditionally been seen as feminine (Ojala et al., 2016). Help-seeking behaviours are used “as a yardstick against which male vulnerability is viewed

and negotiated” (McVittie & Willock, 2006, p. 798); this ‘yardstick’ takes on meaning based on constructions of femininity’s opposition to masculinity (Schippers, 2007).

## **Sexuality**

Sexuality merits discussion with regard to older men, as the issue of embodiment appears visibly in considerations of aging sexuality. Schippers (2007) asserts that, “Western constructions of heterosexual sex still reduce it to penetrating and being penetrated and that relation is consistently constructed as one of intrusion, ‘taking’, dominating” (p.90). Through a series of distortions, the phallus as a symbol of power becomes erroneously conflated with the penis as its physical signifier (Butler, 1990; Connell, 1995; Schippers, 2007); within this framework the erect phallus is a symbol of potency (Marsiglio & Greer, 1994). Accordingly, heterosexual men who are able to function in this way are constructed as the most masculine, or powerful, while those who cannot successfully ‘perform’ penetrative sex may feel emasculated (Sandberg, 2011).

Accordingly, for many older men, ‘staying hard’ retains its importance as a marker of masculinity (Calasanti & King, 2005), or else as a resistance to the narrative of decline that has shaped much of the emasculating discourse on aging, sex and masculinity. However, with the advent of Viagra, sexual ‘dysfunction’ for older men has been commercialised as a treatable problem (B. L. Marshall & Katz, 2002). Potts et al. (2006) identify that Viagra has helped replace a discourse of decline with a ‘sex for life’ discourse that prioritises biological mechanisms in sexual practice. While ostensibly positive, they argue that the rather limited promotion of penetrative sex, facilitated by ‘performance’ enhancing supplements, negates the ways in which sex may change for some men who have experienced erectile dysfunction to become less ‘selfish’ - more focussed on the needs of their sexual partners. This ‘new-found’ view of sex resonates with Jackson’s (2016) assertion that “physical shocks” in older age challenge dominant constructions of masculinity and open up spaces for change to occur (p. 53). Again, through consideration of sexuality, significant tension appears between expectations provided by dominant discourses, and the requirement to renegotiate, to subvert, and challenge these discourses due to the body’s refusal to comply. The ‘physical shock’ discussed by Jackson (2016) applies in the case of Jonathan Goodfoot, explored below. As will be seen, the case has ramifications for a range of masculine behaviours and expectations.

## **The case of Jonathan Goodfoot**

Jonathan Goodfoot was a 77 year old A/NZ European man who presented to the clinic at which I was an intern for neuropsychological assessment (2018) following a traumatic brain injury. Although this was a neuropsychology assessment, the case raised some interesting implications for the ways in which several aspects of masculinity and age intersect. The focus of this assessment case study, will therefore be on qualitative aspects of the assessment, rather than the neuropsychological aspects per se. However, these will also be considered for how they intersect with dominant notions of masculinity such as self-reliance, power, finances, expertise, physicality and sexuality. Particular attention is focussed on what may be the underreporting of mood-based symptoms. Consideration is given to how dominant notions of masculinity – such as invulnerability - might lead to underreporting of mood symptoms in an assessment such as this.

Mr Goodfoot experienced a traumatic brain injury after falling down the stairs at his home, having consumed alcohol that night. He had several small haemorrhages in his brain and was in post-traumatic amnesia for 23 days. He was formerly a financial advisor and salesman. He had been semi-retired for approximately 10 years but, up until the accident, retained some business interests. Since the accident his wife had taken over responsibility for getting the business in order with the aim of selling it.

### **Referral**

The referral came from the Accident compensation Corporation (ACC) for a neuropsychological evaluation to answer the following specific questions:

- Ability to make decisions around finance and business.
  - Ability to plan and execute outings safely.
  - Ability to make safe decisions and be left alone.
  - Assess any changes to cognition.
  - And additional standard questions:
- a. Pre-accident cognitive, emotional, social and behavioural functioning
  - b. Comprehensive assessment of his current cognitive, social and behavioural strengths and difficulties including collateral information.
  - c. Current mental status, mood and any compromising psychological or psychiatric symptoms.
  - d. Comment on his personal, educational, medical, psychiatric, social and occupational history.

- e. Validity of the test results with reference to measures of performance validity.
- f. Consideration of the link between any cognitive deficits and the injury sustained on 01/01/18 and formulation of this link. (Comment on any other explanation/s for the current presentation).
- g. Capacity to make and communicate decisions regarding his finances, personal care and welfare. i.e. Make decisions or foresee consequences of his decisions or of failure to make decisions
- h. Specific treatment recommendations to facilitate Mr Goodfoot's recovery/rehabilitation with regard to his ability to work, drive and function independently
- i. Comment on any non-injury related cognitive, behavioural, affective and/or psychosocial factors contributing to his current presentation; how much of a barrier these would be to rehabilitation and recommendations for remediation?

### **Assessment**

Mr Goodfoot presented for an initial assessment with his wife, Agatha. The purpose of this initial session was to gather information to help answer the referral questions related to occupational, social, educational, and medical history; to assess mood and other possible clinically significant difficulties; inform them of the process of testing; and to administer self-report psychometrics on mood and anxiety.

Mr Goodfoot presented the following week for two hours' worth of neuropsychological testing. The tests administered can be found in the Appendix (a). Following this testing, Mr Goodfoot was recalled to complete the tests he did not complete in the first round, and to gauge his progress. Finally, the couple were recalled approximately one month later upon completion of the report for a feedback session.

### **Summary of neuropsychological testing and recommendations**

Mr Goodfoot was found to have difficulties across many domains of cognitive functioning including memory, processing speed, and executive functions such as divided attention, inhibition, cognitive flexibility, and concept formation.

His wife also reported that he had experienced some difficulties with adaptive functioning, as indicated by the Adaptive Behaviour Assessment System, third edition (ABAS-3). These related to aspects of self-care such as wearing the same clothes every day for weeks on end.

It was also reported that Mr Goodfoot's balance and coordination were affected by his injury – such that he could no longer play golf or participate in skiing and other physical activities he formerly enjoyed.

### **Recommendations**

One of Mr Goodfoot's major concerns was related to when he would be able to drive again. Based on the assessment of his cognitive functioning, he was advised that he should not drive at this time. Any recommendations related to whether Mr Goodfoot should be allowed to manage his business interests and personal finances were largely moot; since his injury, his wife had been tasked with getting any remaining business affairs in order. By the time of the assessment, this had effectively been achieved.

### **Consideration of the assessment in relation to masculinity**

Unsurprisingly, masculinity was not mentioned anywhere in the referral questions for Mr Goodfoot although pertinent psychosocial factors were requested. Masculinity – or gender- are very rarely given explicit consideration within a clinical setting. This despite the ubiquity of gender in everyday life, and the myriad ways in which gender constructions might impact us. Nonetheless, gender differences in the realm of clinical psychology are frequently observed and, in this case, appeared to affect the ways in which Mr Goodfoot reported aspects of his own functioning. They may also have implications for his recovery.

Mr Goodfoot, by his and his wife's account, was a successful businessman who made a significant amount of money. This fact seems to have been a source of pride for him, as he mentioned it several times during his assessment. Economic power has long been considered a marker of masculine power (Diekmann, Goodfriend, & Goodwin, 2004; Dyke, & Murphy, 2006; Michael, 1994). It signifies success in a society that values financial prowess and the qualities that are deemed to be crucial in gaining such success. Some of these include the ability to make shrewd business decisions, the power to influence others, and the confidence required to 'make it' in business. It is unsurprising, therefore, that Mr Goodfoot should have pride in his ability to make money over the course of his career. Although speculative, his articulation of this pride during the interview may have served as a reminder of his financial and (possibly) masculine prowess in the absence of other markers of masculinity such as physical ability. Having been stripped of so much of his cognitive and physical ability, his assertions of financial success might have constituted a performance of masculinity in this setting.



Research has suggested that, where other markers of dominant, hegemonic, or ‘successful’ masculinity are eroded by age or injury, other markers (such as money) may be relied upon for performing masculinity (Canham, 2009). Moreover, in addition to serving as evidence of a ‘successful’ performance of masculinity, financial security serves, to a certain extent, to protect one against the negative impact of such an injury. Although clearly a large setback in the family’s life, Mr Goodfoot had planned well for his retirement and did not have the additional stressor of financial insecurity to be concerned about. He was able to pay for associated health and rehabilitative costs that were not covered by insurance or the public health system. It has been shown that, for many older people, financial insecurity is often a factor in causing anxiety or distress, as the opportunities for earning money are greatly reduced.

### **Invulnerability**

An important aspect of the current assessment was the extent to which Mr Goodfoot was affected by low mood both currently, and in the past. Such an injury might reasonably be expected to affect one’s mood, and low mood is a common sequelae of TBI (Rapoport, 2012). One might therefore expect some depressive symptoms to be present even if criteria were not met for major depressive disorder. However, Mr Goodfoot reported that he was not currently impacted by low mood at all. Although he may have been buffered to some extent by the strong financial position he had created for himself and his family, his reported absence of mood symptoms was notable.

Men often do not utilise health services as much as women due to hegemonic constructions of masculinity as stoic, strong, and invulnerable (Courtenay, 2000; Smith et al., 2006). Men may not fully acknowledge or express emotional vulnerability. Indeed, during the feedback sessions - in which the results of the assessment are relayed to the client and their support persons - a conversation occurred related to Mr Goodfoot’s mood. Agatha relayed that their granddaughter (age 23), who had been looking after Mr Goodfoot while Agatha was away on vacation, considered that he might be depressed. Agatha proffered that he had never been forthcoming to her with his feelings. She also considered that this was something common to men in New Zealand. Agatha pointed out at many times that Jonathan would bluff to hide his cognitive and emotional difficulties. Indeed, he was observed to joke on several occasions within the assessment interview and feedback sessions when discussing serious matters. Agatha appeared to be slightly exasperated by this apparent obfuscation. When she put this to Jonathan within the feedback session, he acknowledged that he was “probably” depressed because he had just been told that he was not allowed to drive.

Indeed, an important question that Mr Goodfoot had was around his ability to drive. Unfortunately, I felt compelled to recommend that he not be allowed this privilege. This was difficult news to break, as driving was clearly very important for him. The ability to drive is very important for people who (regardless of gender) are used to doing so. However, driving arguably serves as a core feature of traditional, or hegemonic masculinity. This can be seen anecdotally in the traditional associations and relationships men have had to cars and, formally, in academic research which has found support for cars as crucial components of masculine self-identity (Lezotte, 2015; Lumsden, 2010; Redshaw, 2017). Driving also possibly represents a larger construct related to traditional, hegemonic masculinity: independence. Although not exclusively a masculine construct, independence has long been valued as important for men to possess. Mr Goodfoot was no longer able to safely execute significant outings by himself because of this inability to drive safely. But the injury also affected his ability keep himself safe around the home. It struck me how Mr Goodfoot had become almost like a child again by becoming almost completely dependent on his wife for domestic tasks, outings, and business tasks. Despite his reticence in saying so, this erosion of independence must have been difficult for him to bear.

Much of this information regarding historical accounts of low mood and vulnerability came from Agatha rather than Jonathan – again revealing the notion of masculinity as resistant to discussions of vulnerability. Agatha discussed how Jonathan went through a period of low mood during his 50s that was noticed by others. She thought of it as a ‘male menopause.’ However, Jonathan himself did not divulge much about this time other than to speculate that it may have been due to ‘market fluctuations.’ Agatha could recall only one other time in their married life when Jonathan had confided his feelings to her. This came following marriage counselling; he admitted feeling that he felt that he was no longer in an exalted position within his business community. As Agatha discussed, he found he was no longer top of the pops’ and expressed some loss around this fact.

### **Physicality and sexuality**

Physicality and sexuality are inseparable from issues of gender. As mentioned, Mr Goodfoot could no longer participate in the sports he once enjoyed, such as golf. Again, sport and physical activity have long been associated with the performance of successful or hegemonic masculinity. Mr Goodfoot admitted as much, when he reported an incident approximately five years earlier where he collapsed from dehydration while skiing. He reported

this as a significant ‘dent’ in his masculinity as he had to be rescued by the helicopter – a fact he found very embarrassing.

Moreover, since the accident, Mr Goodfoot reported that he could not achieve and maintain an erection anymore. This was a significant impact for him and he expressed a sense of loss at not being able to pleasure his wife sexually anymore. He reported that he enjoyed sex and this was a big part of his life. In a frank discussion in the absence of his wife, he revealed that he felt like he was slightly less of a man because he saw himself as no longer able to satisfy his wife sexually. He reported that he was waiting for the all clear from his cardiologist as to whether he could take Viagra. However, it appeared at the feedback session that Mr Goodfoot was to be maintained on the same blood thinning heart medication that prevented him from taking Viagra. These are the types of challenges that aging presents to one’s sense of masculinity.

### **Conclusions**

Mr Goodfoot suffered a severe traumatic injury, which meant he could no longer participate in many of the sporting and leisure activities he once enjoyed, nor could he run his business interests, drive, or maintain an erection. These factors have long been associated with ‘successful’ or ‘hegemonic’ masculinity but have also recently emerged with the concept of the ‘third age’ and ‘active aging’ – which see ‘successful’ aging as a maintenance and continuation of the activities enjoyed at younger ages.

It is reasonable to assume that, with these functions being challenged in Mr Goodfoot’s case, he might experience the loss of a sense of masculinity, and possibly experience low mood. Regarding mood, it is unclear how much of an effect the TBI had for Mr Goodfoot, given that other aspects of hegemonic masculinity – namely stoicism and a reluctance to express vulnerability – stymie the expression of emotional or psychological vulnerability. Mr Goodfoot also has other factors that mitigate against the physical impact of this traumatic injury. Chief amongst these, is his wealth. As has been discussed, wealth is associated with masculinity (Williams et al., 2010) and can serve as another, non –physiological way for displaying masculine power, as has historically been seen in the notion of the ‘breadwinner’. Aside from sheltering him from the potential effects of loss of physical function on his sense of masculinity, it also serves Mr Goodfoot in a practical sense by enabling him to access the classes as rehabilitative resources that will help him improve. This case study, although small, begins to reveal the ways in which masculinity might factor into clinical practice. The loss of traditional

hegemonic markers of masculinity require significant adaptation and renegotiations of self-identity - including those aspects of identity that are gendered.